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FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



CHARLES BOULSON SAUNDERS, M. D.,
Chicago, Ill.

THE PRICE RESOLUTIONS.

"A bill has been introduced in Congress to stop ticket-scalping. Congress make yet make it unlawful for a man who has bought a jack-knife that he can't use to sell it if he gets a chance."—*Cleveland Leader*.

BY a queer contrariety of reasoning, the foregoing called up that series of resolutions introduced into the American Institute of Homeopathy at Buffalo by Dr. Eldridge C. Price, the accomplished editor of the *Formals Southern Journal of Homeopathy*, providing for an Act of Congress to form a National Board of

Medical Examiners, with representatives in each State and each college; the avowed and evident intent of the proposed legislation being to erase the present restrictive and proscriptive State Board Examination laws of several of our States, and, in lieu thereof, create one National Board of Medical Examiners; then by its local representatives conduct *practical* examinations, upon the successful termination whereof the candidate is given proper credentials and permitted to practice his profession in any part of the United States.

* * *

BY perhaps the majority of persons who heard the report of the Committee on Resolutions, this effort on the part of Dr. Price may have been looked upon as wildly chimerical, and beneath the Institute's notice. But this should not be. Who would have imagined, ten or fifteen years ago, that New York and Pennsylvania and Minnesota would permit their statutes to be soiled by such clearly unconstitutional legislation as their present medical examination laws! Dr. Price is in advance of his time, to be sure; but he has proposed the true and, as far as can now be seen, the only practical solution of the offensive State examination problem. If the tendency of the day prevails to pass everything and everybody through a mush-cloth, *i. e.*, through chemical and psychological laboratories and microscopical examinations from marriage to medicine, in the fond belief that thus and thus only the dear people can be protected against the ignorant (and, *therefore*, unworthy)—if this continues a few years longer, there will come the inevitable rebound when all examinations will be hooted and taken off the statute books—as even now there is much pernicious activity looking to the possible abrogation of the government civil service.

The masses are long-suffering, but in the end the Bastille is razed. If it were the dear doctor-employing public making this unseemly and unconstitutional clamor for protection against the non-high-school-teacher, and non-LL.D., medical doctors, then our pen would be silent. There could be nothing further to say. The

people rule. But all who have given the matter a moment's thought, know very well that this is not true. They know it for a grievous wrong against the doctors of all the other States, because dealing not with material things like sugar or tan-bark, or ax-handles, or plaster-images, but with the men and women of a profession nearest the divine, and their relation to the most sacred of all sublunary things—*Life!* They know it as a boycott arraying the one State or community of a free and interchangeable confederacy of States against every other State of that same Union.

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IF there were no medical schools; if there were no proper legislation guaranteeing the *bona fides* of and to the profession; then restrictive and proscriptive legislation against the putative outlaw (because presumably ignorant) would be in order. This, however, is not true. The medical schools of to-day, with a few rare and rapidly disappearing exceptions, are the peers of any other branch of learning. Every State in the Union has some form of medical-practice act which protects its citizens against downright imposture. In what other department of the arts and sciences does the law dare assume that the artist or the artisan of the one State of the Union is an impostor, if he applies to any other of the confederated States—except, and more especially, if he be a medical man or woman? It may be true that New York State, one of the pioneers in such legislation, was overrun with doctors from all the other States (but so it was also overrun with the peoples of the other States), and that some provision had to be made to protect the resident physicians, the majority of whom doubtlessly had moved into New York so long ago that they regarded themselves as to the manner born; but did this give them warranty to override the Constitution of the United States and prohibit an honest and competent, reputable, taxpaying citizen of the other States of the United States from coming to New York and earning an honest living in New York?

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THE *normals Denver Journal of Homeopathy* one time cleverly stated that lawyers, preachers, book-agents, gamblers, and green-goods gentry,—indeed, the representatives of every form of making a livelihood, honest or otherwise,—may come and go or stay in New York or Minnesota or Pennsylvania, except and only a reputable physician. He is barred. If this reputable physician should be Ludlam, or Cowperthwaite, or Strickler, or Green, or Mill-sop, or Kershaw, or Biggar, or Talbot, or Walton, or Wesselhoeft, or Gutherz, or any one of a hundred more or less, of eminent physi-

cians who could be named, who, being a free American citizen, might elect to go to New York or Pennsylvania or Minnesota, and take charge of the little colony of former patients who, in the course of years, have removed thither, he cannot do so. He is forbidden—practically outlawed—because, having been in the practical practice of his profession so long, he has mislaid all the theories and rules of the McGuffey-spelling-book era of his life: he has happily forgotten all about the Least Common Multiple, or the binomial theory, or the number of square inches in a fifteen-acre lot, or the exact altitude of the Himalaya mountains. Therefore, he is incompetent to be trusted with the lives of New York or Pennsylvania or Minnesota people. He is safe enough to write books, to teach in the medical college, to edit a journal, and to practice medicine and surgery in Chicago or Boston, Nashville or San Francisco, St. Louis or Huntsville, but not in New York or Minnesota or Pennsylvania!

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IF the medical politicians of these several Holier-than-Thou States of the Union could show that they have now better doctors "in their midst," or that the State's mortality now is proportionately less than in Chicago, or Baltimore, or Cincinnati, because of the prevalence of these restrictive and proscriptive laws, then some justification might lie for putting up the barb-wires. They dare not do this, for, alas! laws do not work backwards! In twenty years, perhaps, if these laws are permitted to blot the statutes so long, the present practical-practicing physicians,—those who came from the north and the south, from the east and the west,—who began as poor lads with no patrimony other than clear brains and stout hearts, without the aid of sisters and cousins and aunts to gild the spoon, and pass them through school after school in one continuous, unbroken line until they emerged cap-a-pie—that is to say, with wash-bowl cap and mother-hubbard gown—as doctors of everything;—those doctors whom necessity arrayed in broken raiment, glossy at the larger joints and sutures, who cooked and ate oatmeal *t. i. d.*, for a few years, and had "walk in" signs on a half-dozen corners of the house, but withal earned their spurs as they learned their profession;—those doctors who later, in the fullness of time and plenitude of experience, emigrated to New York or Minnesota or Pennsylvania, and THEN put up the bars!—in twenty or thirty years those doctors will probably be dead of enlargement of the heart; the reign of the highly cultured A. M., and L.L. D., and high-school-teacher medical doctors will be supreme, and the protected peoples of New York and Min-

nesota and Pennsylvania will die only of extreme old age!

* * *

DR. PRICE'S idea is correct. Legislation is of course necessary to prevent improper persons from passing through some of the medical schools, or admitting into practice those who have no medical or, indeed, any general qualifications or ability, or those who have never been to a medical school; but when these requirements have been properly complied with as provided for by Dr. Price, a doctor of medicine of one State of a common Union will no longer be an Ishmaelite in some other State; he will be eligible to practice his profession in any State or territory where his best interests may lie. Competition is the life no less of a profession than it is of the barter in hides and indigo and codfish. Dr. Price need feel no discouragement by reason of the cool, nay, almost no reception accorded his proposition at Buffalo; he has devised a feasible plan, and in time it will be revamped and recognized. And we indulge the hope that the great and ever Progressive American Institute of Homeopathy will find the time and inclination, when it meets elsewhere than in New York or Minnesota or Pennsylvania, to call the Price resolutions from the table, and give them that attention which their far-reaching importance demands.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number, as follows: Chironian,²; Clinique,³; Hahn. Adv.,⁴; Hahn. Mo.,⁵; Envoy,⁶; Jour. of Obs.,⁷; Physician,⁸; Recorder,⁹; Sun,¹⁰; Clin. Reporter,¹¹; Journal of Hom.,¹²; Indicator,¹³; Century,¹⁴; Counsellor,¹⁵; Era,¹⁶; Visitor,¹⁷; N. E. Med. Gaz.,¹⁸; Times,¹⁹; N. Amer. Jour.,²⁰; Pacific Coast Jour.,²¹; Southern Jour.,²²; Hom. News,²³; Jour. of O., O. & L.,²⁴; Argus,²⁵; Revue. Homœo.,²⁶; Arch. für Hom.,²⁷; Allgem. Hom. Zeit.,²⁸; Zeitschrift für Hom.,²⁹; El Prog. Homœo.,³⁰; L'Art Méd.,³¹; L'Homœo.,³²; Hom. Maed.,³³; Hom. World,³⁴; Hom. Review,³⁵; JI. Br. Hom. So.,³⁶; Foreign Journal, not Hom.,³⁷; Am. Journal, not Hom.,³⁸; Indian Hom. Review,³⁹; Materia Medica Jour.,⁴⁰; Minn. Hom. Magazine,⁴¹.

Xanthoxylum IN DYSMENORRHEA.—Dr. Barrow.⁷—Miss R., aged twenty-seven, had suffered for years from dysmenorrhea. Her sufferings at the menstrual period were so great that life became almost unbearable. She had tried all kinds of treatment without obtaining the slightest benefits. She had been an in-patient at the Royal Infirmary, where she was told she had a "conical cervix," and, under chloroform, an

operation was performed. This did not result in any relief to her sufferings, the catamenia being accompanied, as usual, with violent pains. Two years after the operation Miss R., worn to a skeleton with suffering and despairing of getting relief, came under the notice of the writer. He prescribed xanthoxylum 1x, ter die, a fortnight before the menstrual period. In due time the menses appeared, and, to the great joy of the patient, there was very little pain. The remedy was continued for some time, and when left off the patient was completely cured.

Arecoline, A TÆNIACIDE.³⁸—M. Ricapet has been studying this alkaloid of the areca nut. On the heart it causes increase of the amplitude without diminution of the frequency of the cardiac pulsations. Toxic doses arrest the heart in diastole. It has great action upon the contractility of the intestine, but is so vigorous that even as a tæniafuge it must be employed cautiously, and the initial dose of 0.015 of a grain must not be exceeded unless it is necessary and the drug is well borne. It surpasses pilocarpine in producing salivation, and eserine as a laxative. It is preferable to pelletierine in its action on the tænia, for it costs less, the active dose is not toxic, it does not cause colic, and no following purgative is required. In such a case it should be given by the mouth in pills coated with keratin or gelatin, in doses of 0.007 of a grain, repeated according to the age and tolerance of the patient, until the result is obtained.

Thuja, AN IDEAL HEMOSTATIC.³⁹—A few months ago a man of fifty years of age came into our office for extraction of lower molar. After removal, the bleeding was quite free and persistent. Upon inquiry we found that he was a "bleeder," and that he had nearly bled to death from tooth extraction once before. After trying everything we could think of without success, while casting about for a last resort, our eye fell upon a bottle of Lloyd's thuja. We made a small plug of cotton, wet it in thuja, full strength, and put it into the bleeding socket; hemorrhage stopped in a short time, and did not return. We have used it in two cases since, with the same result. In three cases of severe nasal hemorrhage that have resisted all other means, satisfactory and prompt results followed

the use of thuja. Also in several cases of incised wounds, where bleeding was severe and persistent, thuja controlled the hemorrhage very promptly.—E. P. Whitford, M. D.

Nux Vomica IN HIGH POTENCY.—Dr. S. R. Stone treated a child of six years, weight twenty-eight pounds. Has been under allopathic treatment. Appetite capricious, sleep restless, very apt to waken about 4 A. M. For the past few months has had occasional convulsions, in which I have never been fortunate enough to see him, but am certain there was some opisthotonos present. Patient also suffered from dyspepsia and constipation. Was called at 11 P. M., October 15, during a convulsion, from which he recovered before I arrived. No symptoms present on which to prescribe, but the history suggested nux, and I gave a powder of the 115 m. He slept better than he had for two years; felt well in the morning. Two more powders were given. He continued to sleep well and eat as he never had. A slight recurrence of the old trouble took place recently, but a repetition of the former prescription relieved at once; shall repeat it every eight or ten days for some time.

Hydrocotyle Asiatica FOR UTERINE AFFECTIONS.—By Dr. E. Nyssens.¹²—Dr. Audouit has observed excellent results in cases of ulceration of cervix, being completely cured in a very short time. These are the symptoms which indicate the remedy, according to pathological and clinical observations: "Dull, aching pain in the region of ovaries. Pressing down in the uterus. Heat deep in the vagina, redness of the vulva and of the vagina, pricking and itching at the vulva. Irritation of the urethra. Redness of the cervix, disappearing on discontinuing the medicine, returning on administering it again. Much increase of the leucorrhœa. Violent pains in and around uterus like labor pains, after administering 4 drops of the 3 dil. to a woman twenty-five years old. Pain in the uterus, also left side. Menstruation appears four, ten, and even fourteen days too soon (observed upon women both well and sick)."

Hydrocotyle Asiatica has shown, by the same author, a curative action in the following cases: Pruritus vaginitis, elephantiasis Græcorum, lupus excedens nasi, eczema impetiginosum, benign

pemphigus, gangrene, aortic stenosis, unbearable itching of the soles of the feet.

The Toad and the Salamander as Drugs.—Hewlett³⁸ shows that the old practice of prescribing prepared preparations of the toad as remedies for dropsy was not so absurd as might at first appear, for, as he has shown, a substance is secreted by the toad's skin that is very like digitalin, and hence may have a favorable effect in cases of cardiac dropsy. It would appear that the active principles of the venoms of the toad and salamander are totally different substances from those of snake venom; the former being alkaloidal, while the latter are proteid in nature. Curiously enough, the venom of the toad and salamander is fatal to the animal which secretes it only in comparatively large amounts. The salamander appears to be remarkably refractory to certain poisons; it is only completely "curarized" by forty-three milligrams of curare, while morphine is apparently quite inactive. It has been demonstrated by actual experiment that the salamander's blood and blood serum act as an antitoxin toward curare. The article seems to show that the belief of the ancients in the venomous nature of the toad and salamander was not altogether devoid of foundation. [Science has again "discovered" active principles in substances long since used by homeopaths.—ED.]

The Action of Sulphur.—Evans of Chicago³ observes that this mineral induces in the animal body a sluggish circulation in the venous capillaries commencing in slight degree and gradually increasing until a decided venous enlargement has resulted, when not only the capillaries, but the entire venous system has become more or less involved. This state has been attributed to a slowly-advancing disease in the ganglionic system of nerves, implicating the cerebro-spinal system at a later period. At any rate, the progress of these conditions, either primarily or simultaneously, is essentially chronic in character, and sooner or later implicates all organs in the body, deranging their functions and changing the structure of tissues. So decided is this venous stasis that chronic congestion is found to be present whenever sulphur or the diseases to which it is analogous have for any considerable time exerted their

influence upon the body-cells. Therefore the sulphur disease, artificial or natural, is essentially of low grade and chronic character. Sulphur, having the property of inducing such a constitutional state, is, therefore, one of the remedies capable of eradicating it when structural lesions have not gone too far or exhaustion of function has not been too great. For this reason it is a drug to be given when the general condition is such that complaints, numerous but not severe, have been present during a long period. At the same time, it is not infrequently called for in acute diseases, particularly the acute exanthemata, when the modified constitution of the patient has caused a deviation from the natural course.

Cicuta virosa IN ACUTE MENINGITIS.—Dr. H. von Musits²⁰ treated J. N. R., æt. forty-three; male; married. A user of alcohol and tobacco. Bookkeeper. After the intense summer heat. Pathogenetic symptoms: Convulsion. Distortion of limbs. Head turned backward. Trismus. Froth from mouth. Biting his tongue. Oppression of breathing. Entire loss of consciousness and of power of swallowing. Convulsions, followed by complete exhaustion. Stupor. Swelling of face. Inability to move the tongue. The whole body seems to be of enormous size. Clinical Symptoms: Had three attacks of convulsions during twenty-four hours, followed by the swelling of the tongue and body. Extreme trembling of the hands. Articulation difficult. Next day profuse watery diarræa stools < by any noise, sudden entrance of any person into the room or loud talking. > by rest and dark room. Remarks: Several times previously has had symptoms of nervous exhaustion. His brother, a physician, died last spring from paresis in consequence of excessive use of alcohol and drugging. After two doses of *cicuta vir.* 200 there were no more convulsions and he was perfectly cured in two weeks. No relapse.—Dr. Henry von Musits.

Guasatunga; A NEW REMEDY.²²—Dr. Oliveira writes from Brazil that he has prepared an excellent tincture of an indigenous plant, known as *guasatunga*, which has proved most efficacious against the bite of serpents, accompanied with bleeding at all the orifices of the

body (symptom of the bite of the rattlesnake). He also informs us of the admirable action of another native plant, prepared by him, in a case of naso-pharyngeal polypus of more than four years' standing. All the resources afforded by the materia medica having been exhausted, with invariably negative results, he administered the new remedy, and, to his great surprise, saw the polypus grow moldy, ulcerate, and drop off completely in from twelve to fifteen days. He used the remedy in the third decimal, sprinkling the polypus three times daily with the first decimal trituration. The name given by him to this plant is *carcinomæ herba*.

We regret that Dr. Oliveira has not had time to make the proper pathogenesies, which, it is to be hoped, will soon be furnished by observation and experiment.

Hepar Sulphur ix IN PURULENT NASAL DISCHARGE FROM A MARE.²⁰—One of my patrons asked me if I would prescribe for one of his farm horses. I replied that I would treat any dumb animal belonging to a patron of our school. He said "he guessed the beast would die any way. It seemed to have terrible gatherings in its head, breaking and discharging through the nostrils." The local veterinarian treated it first for pneumonia, and finally said it would die and there was no need of his coming any more. Subsequently it broke, discharging through the nose. This had occurred several times. It was the most profuse discharge of yellow pus from the nostrils that I had ever seen. Before it would break she would be dull, stupid, dizzy, and unable to eat or drink. Afterward she would brighten up and pick at her food for a few days until the abscess began to refill. Clinical symptoms: Profuse discharge of yellow pus from the nostrils. Remarks: Five-grain powder every three hours. It did not break again and improvement was rapid, to the great astonishment of my patron farmer. He allowed "them powders did stink enough to do some good."—Dr. Leonard.

Ptelea Trifol. φ IN HEPATIC DISORDERS.²⁰—Mrs. A. W., between fifty and sixty years of age, applied for treatment in spring of 1896. Was the most disconsolate looking and unpromising case. Had symptoms of enlarged liver. *Helonias* and *chelidonium* gave no

results. Clinical symptoms: Thin and emaciated. Whitish, sallow complexion. Easily out of breath. Tendency to œdema of feet and ankles. Distress and fullness in stomach after eating. Cannot lie on the left side. Feeling of weight, pulling and dragging from right side in region of liver. Liver feels full and bad. Remarks: Three doses a day. A marvelous change took place in her appearance. Regained usual flesh and color. I thought she could not live a year when I first saw her. To-day she is practically well.—Dr. Leonard.

Apis Mellifica.—Gibbs Blake, M. D.³⁵—Although the provings of this drug in the *Cyclopedia of Drug Pathogenesis* are numerous and full, they are wanting in respect of pathological changes. A paper by Dr. Langer of Prague, published in the *Archiv für experimentelle Pathologie und Pharmakologie* (Band 38, s. 381), gives a full account of the physiological action of the poison of the honey-bee. In the first part of the article he describes the anatomy of the stinging apparatus, the physical and chemical qualities of the bee-poison, in a very complete manner. He succeeded in isolating a considerable quantity of the poison.

Dr. Langer thinks that the post-mortem appearances, the local necrotic and irritating effects of small quantities of the poison, its power of destroying the red corpuscles, and the production of hemorrhage place the bee-poison in the same category as that of the vipers and rattlesnakes.

I think that the following account will be a useful supplement to the former provings of *apis*:

The local application of the bee poison produces a necrosis of the tissues in the center of the spot to which it is applied. Around this center there is infiltration of round cells, œdema, and hyperæmia. Phagocytes help to eliminate the poison. The local application also causes the animal to eat and drink to a larger amount than in a state of health, and often produces albuminuria. The results of the gradual intravenous injections of 6 cubic centimeters of a 1.5 per cent. solution of the pure bee-poison are thus given. In fifteen minutes after the first ccm. was injected, the diminution of the blood

pressure was very marked, with slowing of the pulse. Gradually the blood pressure increased, and almost recovered its original state. The further injection of one-half to 1 ccm. did not again produce diminished blood pressure, but the continued movements seemed to increase the blood pressure. Clonic spasms became gradually universal with trismus, nystagmus, and emprostotonos. During brief pauses of spasm the animal lay on its side, paralyzed. Respiration gradually ceased.

Post-mortem.—The pupils were widely dilated. The brain full of blood; no hemorrhage into its substance. The veins of the meninges full of blood. The pericardium completely distended with blood-stained serum. The right side of the heart much dilated, the left side contracted; fluid dark blood, with some fresh clots in the cavities of the right heart; the endocardium, as well as the intima of the large vessels, markedly stained rose color. A microscopical examination of the blood showed very few red corpuscles; the blood very lake-colored, with much dissolved blood-coloring matter, and with the spectroscope showed metaglobin. The lungs were full of air, and small hemorrhagic infarctions were seen on the outer surface. The liver was much congested; no hemorrhages were visible; the gall bladder purplish; the mucous lining much congested and bloodstained. No obvious change in the spleen. The kidneys were much congested, the tissue uniformly discolored with blood; the pelvis also much congested. No urine was found in the firmly contracted bladder. Many ecchymoses the size of a lentil were found on its mucous membrane. The intestinal canal was stained throughout with blood. The duodenum, jejunum, and ileum contained bloody mucus. On the peritoneal coat of the stomach there were many hemorrhagic points. The pancreas was infiltrated with blood. The glands of the mesentery also showed lenticular hemorrhages.

We find in this proving that the use of *apis* for dropsical effusions is confirmed, and especially for effusion into the pericardium. The proving also suggests the use of *apis* in the exanthemata, when accompanied by hemorrhages, especially as they are met with in cases of measles of severe type.

AMBLYOPIA.

E. R. TUTTLE, M. D., Salina, Kan.

UNDER this heading were classed, in former times, all diseases of the deeper portions of the eyeball, viz., of the retina, the optic nerve, and the choroid, of which the only symptom was impairment of vision. Since the invention of the ophthalmoscope has rendered it possible to make a complete examination of all parts of the eye, the study of these diseases is more satisfactory, and we class among the amblyopic affections only those cases of impaired vision that are not associated with any visible ophthalmoscopic changes of the fundus, and are not due to errors of refraction that can be corrected by glasses. But we include in this category "certain cases of impaired sight in which a pathological ophthalmoscopic appearance" (atrophy of the optic nerve) subsequently develops.

Amblyopia is found under many different conditions and is usually progressive. The development is greatly favored by a poisoned or vitiated state of the general system. The toxic elements may be urea, lead, alcohol, tobacco, or any of a number of substances, with tobacco far in the lead; though the worst case of toxic amblyopia I ever saw, one bordering on amaurosis, was from a drink of wood alcohol taken surreptitiously while the druggist was out. Amblyopia followed in about twelve hours, and vision was reduced to one two-hundredth. In toxic amblyopia the pathological condition is a chronic retro-bulbar neuritis. The first noticeable symptom is impairment of vision, which sets in so insidiously that in most cases the patient cannot tell just when it began. Each eye is usually affected to the same extent, while in other intra-ocular affections, as cataract, choroiditis, atrophy of the optic nerve, etc., the eyes are usually affected to a different degree.

Hemeralopia, or night blindness, is one of the symptoms of pigmentary degeneration of the retina; it usually develops without recognizable ophthalmoscopic symptoms. It often affects considerable numbers of people, such as sailors and soldiers whose nerve energies have been lowered by long exposure to glare of light and to weather, and who have had limited and improper food. Impaired nutrition often causes its devel-

opment, and we are told that it is common in Russia during the rigorous Lenten Fast of the Greek Church. It is accompanied by depraved nutrition. A peculiar xerosis of the ocular conjunctiva, corresponding with the palpebral fissure, often develops with it. It usually forms a dry anæsthetic patch at the outer border of the cornea. In many instances the patch becomes iridescent, and silvery and dry scales can be detached from it. The principal symptom is rapid failure of vision in dim light.

Nyctalopia, or vision by night, is generally a symptom of central scotoma, the cloud in front of the eye being less annoying when objects are only dimly illuminated and when the consequently dilated pupil allows more light to reach the peripheral parts of the retina.

Hemianopia, or only seeing half of an object, is usually unaccompanied by any characteristic pathological alterations that can be demonstrated with the ophthalmoscope, but is due to some cerebral lesion, such as tumors, embolisms, injuries, softenings, etc. There is the homonymous hemianopia in which all points in the field of vision of each eye, lying either to the right or left of the point of fixation, are lost to view, as right homonymous hemianopia and left homonymous hemianopia. Contrasted with the homonymous lateral hemianopia there is a temporal variety—heteronymous lateral hemianopia, and a nasal variety—heteronymous nasal hemianopia. Superior and inferior hemianopia shows itself by a dividing line that is horizontal.

Color-blindness may be either congenital or acquired. Congenital may be total, so that no color is recognized, though this is extremely rare, or it may be partial, only a certain group of colors being deficient, which is quite common. Acquired color-blindness is a frequent symptom of affections of the retina, of the optic nerve, or of the terminations of the optic tracts. Affections of the optic nerve, especially atrophy, are by far the most frequent causes of disturbances of the color sense. Such disturbances are never absent when the visual acuity has become reduced as a consequence of the affections of the optic nerve. The color sense is not extinguished suddenly, nor for all the colors at once; but first the perception of green and red is impaired, then of yellow, and finally that of blue.

Acquired color-blindness may therefore be utilized for purposes of diagnosis; for if the sight is impaired simply by obstacles anterior to the retina, such as opacities of the vitreous, lens, or cornea, the perception of color remains intact, even when the general features of the objects can be no longer recognized, but as soon as the color sense proves to be defective an affection of the light-perceiving apparatus must be assumed to exist. Color-blindness is of the greatest importance in certain vocations, as green, a color used for signaling, is usually the color that is seen in the smallest circle of the field of vision. The color-blindness varies in different parts of the visual field. The central perception may be quite normal, but as soon as the colors are removed farther from the point of fixation, they become indistinct. The disease is mostly seen in men, because they are more exposed to the causes.

Congenital amblyopia is not rare; it may affect one or both eyes; when only one eye is affected it often passes for several years unobserved, only to be noticed after the good eye has given some trouble on account of the overwork it has been called upon to perform. When unilateral the affected eye is very apt to fall into a state of squint. The higher degrees of amblyopia are mostly associated with nystagmus.

Amblyopia ex anopsia, from non-use of the eye, is of frequent occurrence in old cases of strabismus; and accompanying the formation of indistinct retinal images as it occurs in cases of faulty refraction of the eye that has never been properly corrected, or perhaps cannot be properly corrected on account of irregularity of the curvature of the cornea.

The prognosis is favorable in those cases of amblyopia due to toxic influences; provided they have not been at work too long, and that the patient's vitality is not greatly reduced. Amblyopia congenitalis cannot be relieved, but amblyopia ex anopsia can be greatly benefited by the systematic use of the eye. In one case I have in mind the vision improved from twenty-fourtieths to twenty-twentieths after the operation for strabismus and proper exercise of the eye. A certain not too brief period of observation is always necessary in order to give any decided opinion or prognosis. The examination of the

different visual functions furnishes certain data; the condition of the visual field is especially important. If the boundaries of the field remain normal, and if eccentric vision shows an impairment which simply corresponds to that of central vision, the prognosis is relatively favorable.

Blindness is also rare if there is a circumscribed central impairment (central scotoma) with free visual field, and if both remain stationary for a considerable time. But the prospect of complete recovery is slight. If amblyopia with uniform impairment of vision resists proper treatment, careful and repeated examination must be made for central scotoma. If peripheral defects in the field of vision appear early, if the principal visual field is narrowed, a progressive character of the blindness is to be apprehended; particularly if a change in the color of the papilla appear (usually progressive optic atrophy). Constant attention must be paid to the ophthalmoscopic appearance of the papilla. Reaction of the pupil to light is a favorable sign.

The course is gradually a progressive one, but the amblyopia may reach its acme in a few hours.

Treatment.—Let the cause, if discoverable, be your guide as to treatment. In uræmic poisoning treat the Bright's disease. In lead poisoning, appropriate medication and change of occupation. In quinine amblyopia the recovery is usually perfect in a short time after stopping the abuse. In tobacco and alcoholic amblyopias, no spirituous liquor or tobacco, even in the smallest quantity, is to be allowed. Electricity is sometimes very beneficial; the galvanic current should be used every other day for five or ten minutes. In hemeralopia, a generous diet, rest for the eye and protection from light; in some cases confinement in a dark room may be necessary.

The idea has been suggested that in certain well-known conditions of hysteria a judiciously administered pinch of snuff might have a beneficial effect. Familiar to everyone is the perverseness with which such hysterical attacks resist ordinary remedies, and it seems not improbable that some of them might be curtailed by a period of vigorous sneezing.

ECHINACEA IN APPENDICITIS.

By HENRI G. IDE, M. D.*

I WANT to say to you that in this epidemic of appendicitis I have had my share of cases, and as yet have not had to go outside of echinacea 6, belladonna 1x, merc. cor. 3x, and arsenicum 30x. I consider their importance as I have placed them. If there is any such thing as a specific (which I am sure there is not) echinacea 6, gtt. v once in 30, 60, 120 minutes is a specific for appendicitis. It has proved so with me, but I have no guiding symptoms to offer. Cases that are well-marked bell., or merc. cor., or arsenicum, and that have failed to yield to what seemed to be the indicated remedy, have all yielded in my hands to Boericke & Tafel's (Philadelphia) echinacea; and I think every homeopathic physician ought to go to his cases with this remedy at hand.

OXFORD, MICH.

WHAT DOES THIS PROVE?

A WRITER in the *Atlantic Medical Weekly* for November 6 reports A Case from My Note-Book, which, in brief, is the confinement of a woman in her eighth childbed, who had not menstruated since the third month after her marriage, the children coming with regularity, neatness, and dispatch. She has never had a physician for herself except at the confinement times, and even then, judging from the writer's report, it was more a matter of form than of necessity. She has never had the customary aches and pains of her sister-woman. In two weeks following the confinement this thirty-nine-year-old woman with the healthiest of healthy-looking faces, weighing 165 pounds, was up and about and attending to all the duties appertaining to her place as the wife of a hard-working farmer. The *Am. Med. Weekly* writer seems to cite the instance as something remarkable and by inference inveighs against the other women for having such hard times, etc.; still it is nothing unusual. We have no doubt that in the experience of most every physician some such cases have occurred.

In our former country practice, we were one morning leisurely summoned by a shiftless, list-

less, do-less fellow, who had walked in through the snow, to go out and see "Clara" sometime soon—about four miles out in the country. What was the matter with Clara? Didn't know; kid, he guessed! Arrived there, a bitter, cold day, found Clara sitting in front of a cheerless, almost cold kitchen-stove, on her lap a dishpan filled with icy-cold water in which swam some dirty potatoes and which she was unconcernedly peeling and dropping, sliced and quartered, into a convenient receptacle on the back of the stove. The utter absence of any sort of haste, or any evidence of preparation even, in this hovel; the absence of the stereotyped thirteen dozen large napkins and the thirteen dozen small napkins, and innumerable belly-bands and so forth and so forth, caused the astonished query when she expected to be confined, and whether it was not possible for the writer to make a few calls several miles galley-west? No, she replied, there aint going to be any time to waste. She would be sick soon. Insisted then on examination. What's the use of all that? She knew about this. She had had five children. Within half an hour after our arrival it was all over, and No. 6 had been added to the other five half-starved children and three or four dogs. She finished her culinary preparations, stirred the fire, sent the children to a neighbor's a mile or more away through the snow storm, went into the cold dining-parlor-sitting-bed room, turned down the "comfort" of a poor looking bed that seemed not over clean, got into it just as she had been in the kitchen, without washing her hands or removing a garment, merely kicking off her old shoes. The examination proved that there was no time for the ak-ko-shure to parboil his hands in bi-chloride, or use creoline, or green soap and brush, or give antiseptic injections, or do any of the other many, many beautiful things recommended by every Professor of Obstetrics and every text-book. There was not more than one real pain, and that occurred as the head passed over the vulvar structures! It would be impolite to chronicle here the remarkable language indulged in by this parturiente, at that moment!

In another instance in this same practice, the writer was called far out into the country to see a baby in convulsions. Arrived there, in the

* From a letter to the Editor.

middle of a bad night, there was nothing to do but watch the struggling little soul take leave, and write a burial permit. The surroundings were so poor that no thought of sending a bill was ever entertained. A couple of years later during the election the village went "wet," and a German from a neighboring town came and opened a beer "joint." Shortly after this a woman, in deep mourning, called at our office and offered to pay her bill. Memory utterly failed us. Asked the name, but that was familiar only as being identical with the saloon-keeper's. Circumstances described took us back to the baby which had died two years ago with convulsions. While writing out a receipt for the money, of which the woman seemed to have a plenty, and having remarked the mourning costume, we entered feelingly into the scene of the baby's death, striving to say something appropriate to soothe this stricken mother's heart, since she was still in mourning for her child—wove in something about the death of a sweet, innocent little child, with all the world before it, as yet without knowledge of that misery and sinfulness with which the adult so soon becomes familiar—bidding her turn for consolation—when the woman "chipped" in, in a rather unmusical but cheerful tone, as she shrugged her capacious shoulders, "Oh, dot makes nodings out, doctor: we got annudder one!" And they had! It was for her mother that she was bowed down in grief evidenced by the trappings of woe.

What Does This Prove? Why, simply, that one swallow does not make a spring. That mothers will still have all the pain and agony of child-bearing. That other mothers mourn as those without hope for the death of the little heart which rested for nine months *under* her heart and *on* the heart just long enough to become ineffaceably endeared. That these are exceptions which prove nothing—except the rule.

A doctor was called in to see three sick children, for whom he prescribed. A few hours after the mother came to him in great trouble, telling him that two of the children had died. "But," said the doctor, "I gave you medicine for three. Where is the other?"

GUARANTEERING A CURE.

AN object lesson, in the form of a girl fourteen years old, presented itself at Dr. Helmuth's last clinic.

She was suffering from the effects of a fracture of the arm and fore-arm, which had taken place five years previous.

At the time of the accident a physician was called, who set the fracture.

The father of the girl was not satisfied with the appearance of the arm and told the doctor that he would like to put his daughter in another physician's care. The doctor replied that if he would leave the case in his hands he would guarantee a cure on his life.

The extent of the cure every student present had a chance to see.

The arm was badly deformed. The hand was permanently flexed upon the wrist, so that the fingers touched the fore-arm.

After hearing the story, Dr. Helmuth turned to the students and said: "Young men! Here is an object lesson for you. Never guarantee anything in medicine 'on your life'; especially anything pertaining to fractures and dislocations. Do your best, your very best; but the man who guarantees a cure on his life should be shot on the spot. I could operate and reduce the deformity, but the arm would be stiff, and it takes more knowledge for me to say to her, 'Go home, I cannot help you!' than it does to perform an operation. It has taken me forty years to gain this knowledge."—*Chironian*.

MEDICAL TEACHING FOR WOMEN.

WE have received the Annual Announcement of the New York Medical College and Hospital for Women, and are much pleased with its straightforward, businesslike way of asking for professional patronage. It contains a great number of talented women in its faculty, and, as well, some of the most eminent medical men of New York.* To us this school seems a happy solution of the vexatious problem of medical education for women. There is no

*The corps of teachers contains Drs. Phoebe J. B. Waite, M. Belle Brown, Gertrude Allen, Emily V. D. Pardee, J. de la M. Lozier, and Annie Smith Campbell. Among the gentlemen are Drs. St. Clair Smith, J. T. O'Connor, H. M. Dearborn, Malcolm Leal, Sidney F. Wilcox, A. R. McMichael, William H. King, George W. Roberts, and F. H. Boynton.

doubt that a sensitive, refined, highly cultured woman, who, having overcome her natural shrinking from coarse publicity, and for beholding things grewsome and horrible, is better able to pursue her medical studies where she will be only in the company of her sisters, and where the majority of the teachers are of her own sex. Though, on the other hand, it may be true, if a woman expects to do men's work, the sooner she mingles with them, and becomes accustomed to their tobacco and drinking habits and baseball talk, and other some many masculine evidences of superiority, the sooner she will understand their weaknesses and so outstrip them in the professional race—that is, the masculine idea of a professional race.

Personally we have ever had but little enthusiasm for a mixed medical school—referring to the mixing of the pupils and not as it might apply to the faculty. It has always seemed to us that a woman could be better fitted for her place in life, either socially, domestically, or professionally by the better-skilled of her own sex. Much stress has been laid upon the fact, in times past, that there was no place for a woman to go to be medically taught except in the man-officered schools. That *was* a fact. But it continues so no longer. There are several good schools and at the head, we think, stands this school of which we speak. It is very true that a man-officered school is one having, possibly, the best general clinic: yet, when all is said, there are very few women who care for the rough and tumble work of the profession. They usually drift, sooner or later, into specialties. Why, then, subject them to the nastinesses and obscenities of certain clinics when there is no inherent probability that they will ever knowingly touch such filthiness?

There is a good deal of humbug about some of our medical schools which bid for the women patronage on the basis that the gentler sex is represented in that faculty. In some few of the mixed schools an honest attempt is made to deal justly by both the ONE woman in the faculty and the handful of women students in the class. Still, who of the profession knows not that in the majority of cases the ONE woman is retained in the faculty *not* because of superior merit (though as a rule she does have superior merit), but simply to attract a few women students? Look at the title of such lone, lorn ONE woman, and what do we find? In the main she is subject to a masculine professor, occupying some subordinate relation in the same chair, or she is shunted off to some petty many-times subdivided specialty. If the woman is honestly to be a part of that faculty, let her be given a full portfolio with full power to act. Let her counsel be asked and cherished. Otherwise

the class cannot fail to imbibe the feeling of pitiful tolerance with which this ONE woman is permitted by the man majority of the faculty to appear *one* whole hour each week, in walking costume, primped and curled, hatted and gloved, before a class of men—and a few women—and in piping treble, with much wetting of the lips, and a ridiculous affectation of the fifth sound of A, read off a medical lecture.

There is in this no wish to belittle the efforts of the woman professor who is honest in accepting place with a lot of men: she who has undertaken such place because of an honest belief that she is called, and an honest desire to teach that concerning which she knows something; and not because she is a woman standing for her sex, or because it will give her greater prestige in her under-cutting, fee-reducing professional walk! *That* honest woman is an ornament to the profession, and to be commended at all times. In the New York Medical College and Hospital for Women the women are genuinely professors, honest, professionally trained, and capable of holding their own with any man. They make an honest bid for woman's patronage. It is an honest invitation to woman to attend a well-officered medical school, with all the advantages of a first-class medical institution; where she will be in constant relation and association with teachers who know her intimately and with her sister-students, away from tobacco smoke, poker-playing, boisterous singing, pillow-throwing, public skeleton-parading, gentlemanly horse-play, and other of the masculine diversions which obtain in many of the mixed medical schools of the land.

FOREIGN HOMEOPATHIC CONSERVATISM.

DR. I. T. TALBOT—need we say of Boston—in a pleasant letter says, among many other good things, that “in Boston, with perhaps six hundred thousand people, we have more homeopathic physicians and institutions, which are doing more work, than in all London and Paris combined, with five million people.” Of course this is true. But why? Is it not because in the countries or, rather, cities named, the younger school is the immediate outgrowth of the old, and is, therefore, in great part filled with the teachings which were instilled in the infant time of its medical studies? Had the student been given the advantages of an independent homeopathic school, and taught homeopathic medicine *de novo* and not as an appendix to old-school lore, does it not seem probable that there would be more enthusiasm for homeopathy and not nearly so much fear of, and regard for, the frown of the old school? We believe there is one modern

ecclesiastical body which says "let us have the first six years of the child; the other sects may have the rest."

There, for instance, are the English homeopaths, many of whom are giants of homeopathic lore, whose writings, and, for aught we know, whose practices, are almost world-famous; yet who, when it comes to doing aught tending to bring homeopathy prominently before the people, shrink as if some crime were contemplated. They defer to allopathic opinion. Instead of making an effort to be free, and becoming a school distinct and strong and noble, they hide behind the ethics of the old school and deprecate the aggressiveness of the younger membership. Note in particular that scandalous conduct of the modern "Prunes-and-Prisms" Society, the B. H. S.—in its dealing with that unfortunate but contrite ex-member who once upon a time believed he saw additional light in Matteism! We have said it before, and repeat it because we believe it to be true, that if England had a few men like Talbot, Dake, Ludlam, Paine, Fisher, Orme, Strickler, the Hanchetts, the Allens, Walton, Green, Lee, Norton, Beebe, McClelland, Van Bunn, Bailev, Gatchell, Dale, Comstock, McElwee, Baxter, Price—and others, all good men and true—there would soon be a smashing of that truckling conservatism which discountenances all homeopathic independence and is content to read lectures to the old-school graduates, from behind the arras of a hospital. There would be some memorializing of the proper legislative bodies; there would be such legitimate pressure brought to bear upon the necessary officials that they would be glad to concede equal rights to the homeopaths.

In our recently concluded pilgrimage to England we were glad to have many preconceived notions expunged. We were pleased, in especial, to note the degree of freedom enjoyed. And it was difficult to understand why, in the matter of recognition as a school of medicine, homeopathy halted and was serenely happy to bring up the rear. We say again that we believe the fault to be in the practitioners themselves, and for the reason stated—that they are so terribly in dread of the ethical fetich that they fear to speak aloud lest the allopath look not kindly upon them. Allopathic ethics and methods, as well as allopathic medicines, have been ineradicably woven into their professional woof and warp. Of course this does not apply to all English homeopaths. We had personal contact with many, and have had much correspondence with others since, which causes us to feel that, if a few of the acknowledged leaders would really lead, there would soon be a tumbling down of the allopathic walls, in so far, at any rate, as homeopathic medicine was concerned.

COMBINATION TABLETS.

IN a letter recently received from our good brother, Dr. Leach (formerly The Man from Texas, but now safely ensconced in that latter-day paradise for medical men, Minnesota), we note what he has to say, among many other pertinent things, concerning the evil of polypharmacy. This is a very prominent and persistent evil, and we do not wonder at the heat with which our distinguished brother discusses the practice. In a journal of our school of practice, edited by a good homeopath and brilliant writer, but printed and published by a HOMEOPATHIC pharmacy, we find three pages of valuable space taken up with the super-excellencies of forty-five combination tablets which are the output of this HOMEOPATHIC pharmacy and with the which any jokel can cure any sickness known to modern life. It gives seven good reasons for the making and issuing of these tablets, but the eighth reason, the best of all, namely that IT IS NOT HOMEOPATHIC, it utterly fails to print. Probably pried in the printing office.

Is it a fact, Mess. the Homeopathic Pharmacists (limited), as you dare to flout in our face, that a single one of these rare combinations is built upon the prescription of any one homeopathic physician? We deny it! And we put you to the proof! It is heresy, rank and dishonorable heresy, to utter these combination remedies under the homeopathic flag! It is most damnable to tempt the young practitioner, who is not yet firmly grounded in his practice, with these pretended easy ways of practicing medicine! It is a disgrace to HOMEOPATHY, and a blot upon every practitioner of Hahnemann's doctrines, to have this sort of practice—nay, rather, this species of chemical slop—advocated by and issued from a homeopathic pharmacy. Even an ordinarily intelligent layman knows that homeopathy does not deal in combination remedies. It remains for these pretended homeopathic pharmacies to foist their mongrel spawn upon the profession through a homeopathic journal which advocates in its editorial pages the brightest of old-fashioned homeopathy, while the wicked partners, the commercial homeopathic pharmacy, make use of that livery of heaven to advertise its wares, of which the foregoing is a glaring specimen. The American Institute of Homeopathy has already put itself on record against this pernicious trend in the business policy of one or two of our homeopathic pharmacies. Let the Institute take one step farther and step on these pharmacies whose members dare to do this unhomeopathic thing and still sit in the chief seats of the homeopathic synagogue.

HAHNEMANN AS A PSYCHOLOGIST.

TO Samuel Hahnemann, "The Grand Old Man" of homeopathy, is due the honor of having been one of the great discoverers of the *sensitiveness* and the *stability* of the human mind; and the discovery of these facts led this wonderful healer of the sick to successful issues in the treatment of both mental and physical diseases. This recognition of the qualities of *sensitiveness* and *stability* of the mind led the healer of Leipsic to consider, with far-reaching effect, the power of drug action in the relief of mental disorders; and this clear discernment of the comprehensive healing effects of drugs led to a sublime and successful ministration to the wants of a "mind diseased." . . . Samuel Hahnemann not only discovered and enunciated the principles of homeopathy, but he discerned, likewise, the complicated and kaleidoscopic conditions which exist when mind and matter harmoniously mix within the convolutions of the human brain. His first experiment of curing the insane by applying the law of similars was overshadowed by his yet sublimer triumphs in other fields of effort, but he left the record of a short, successful experiment in psychological medicine, and this record, like a pearl exhumed from the depths, is beginning, at last, to reveal its true worth to the world.—*Selden H. Talcott, M. D.*

METAPHORIC MATERIA MEDICA.

TO exemplify the truth of the assertion that drugs produce effects upon the mind through their action upon the brain, we have only to refer to the ghastly and agonizing fear of death which is caused by aconite; to the hot, pugilistic, and bellicose frame of mind in which we find the belladonna patient; to the intense restlessness, anxiety, and suicidal propensity of the arsenicum patient; to the hilarious, erotic, reckless, jolly delirium of hyoscyamus; to the frenzied fear and abject cowardice of stramonium; to the ideational and ecstatic delusions of opium; to the unchained imagination and limitless extravaganzas of cannabis indica; to the profound and abject despair of salvation which accompanies the physical collapse of veratrum album; and to these might be added the mental effects of actea racemosa, and calcaria carb., and rhus tox., and veratrum vir., and nux vomica, and ignatia, until we might say of each victim of these various drugs:

He walked with demons, ghouls, and things
Unightly; terrors and despairs;
And ever in the blackened airs
A dismal raven flapped its wings,

From the December, 1897, *Medical Era*.

CHICAGO, December 6, 1897.

To Whom It May Concern :

Like many other fortunate persons, I am not dependent for a certificate of character upon those mendacious liars, Frank Kraft and Sam Jones.

CH. GATCHELL.

162 Thirtieth Street.

AN OBSCURE CASE.*

Editor Maryland Medical Journal :

DEAR SIR: I enclose a letter just received and hope you may find some use for it. It is too good for the waste basket and I should like to know which tube it is in and what treatment you would advise. It seems a good case for the Roentgen ray. Yours truly,

G. A. FLEMING, M. D.

MACH 27th 1896.

DR. FLEMINGS.

dear Sir

I Just arrive Home a few days ago & I was Eating some Catfish Wednesday & a bone Slip down The Rong Pipe not my wind pipe noah The tube That Carry my food down but There is one on Each side of the main pipe & it slip down The one on The Right side I dont Think It is stuck because It moves about I Think. & last night It made me feel very badly I Think If It Had of gone down with The food It would of Past of with The food so now please to let me no what to do for It at once please.

Book Reviews.

"Diseases of Females and Children and their Homeopathic Treatment." Containing also a full description of the dose of each medicine. By Walter Williamson M. D., Philadelphia, Boericke & Tafel, 1897. This is a small hand-book of a little over 250 pages, being in its fourth edition. The price is \$1.00. It partakes of the usual hand-book order of books; is clearly descriptive of the various diseases of which it treats. The introduction to each such disorder is drawn with a master hand, and the directions in the way of prophylactic and home treatment is very brightly done. It has also the merit of sticking to the ONE remedy. We are in doubt, however, as to the dose. It seems to expend itself on "six globules" here, and "three globules" there. The dilutions are not to be found, or if they are they have escaped our desultory exami-

* With apologies to the *N. E. Med. Gaz.*

nation. Of what power or potency are the globules, and what size the globules?

A PRACTICAL TREATISE ON APPENDICITIS. Prepared Especially for the Use of Students and General Practitioners. By HOWARD CRUTCHER, M. D., Professor of Surgical Anatomy and the Principles of Surgery in the Dunham Medical College, Chicago; Surgeon to the Dunham Free Dispensary; Consulting Surgeon to the Garfield Park Sanitarium; Member of the American Institute of Homeopathy; of the State Homeopathic Medical Societies of Illinois, Missouri, etc.; of the Homeopathic Medical Society of Chicago; of the Englewood Homeopathic Medical Society; Honorary Member of the Southern Homeopathic Medical Association, etc., etc. Illustrated. Chicago: Hahnemann Publishing Company, 1897.

"The aim of the author," says the author, "has been to prepare a helpful book, along practical lines, for the use of those whose bedside experience in appendicitis is limited. . . . It has throughout been the author's desire to present generally accepted rules of practice in preference to purely personal methods." If we should write for an hour in review of this book we could not more clearly state the value of the treatise than is outlined in the quoted sentence. Dr. Crutcher has not essayed to embody all anatomical and surgical knowledge from Gray to Van Lennep in his modest brochure; but yet has omitted nothing bearing upon the subject, or whose omission would tend to destroy its effectiveness. The subject itself, however much we may, personally, discredit its reported frequency and for the reported causes, is one that is attractively discussed by Dr. Crutcher, and will repay a thorough reading. Dr. Crutcher wields as trenchant and incisive a pen as he does a scalpel. His composition carries the charm of conviction. His quotations are manifestly apropos, and equally convincing. We know Dr. Crutcher of old; and we know his views on appendicitis; and are the more astonished at his moderation of language when he discusses the operative measures, and, *per contra*, the objections thereto.

The engravings possess the merit of being very evidently original, made with a pen, and by someone who knew the lay of the anatomical land. The medical treatment is well presented, is rational, and, above all, homeopathic. Dr. Crutcher never forgets that he is a homeopath, even though dealing with a purely mechanical department of the great art of medicine. He inclines to the belief, harbored by the overwhelming majority of physicians who are not specialty-surgeons, that every pain in the ileo-

cæcal valve is not necessarily an operable appendicitis: in other words, that medicines properly administered may be looked to with hope of good effect. Only quite recently we read the dictum of another surgeon of our school which declared that appendicitis is a purely surgical condition and any dallying with remedies was criminal! Taken all in all,—and we have read through most of this book because of its charm of composition as well as for its intrinsic value as a medical classic,—we are of the opinion that Dr. Crutcher has given us a good book on a much mooted subject; that he has taken a common-sense view thereof; and that while he necessarily concedes the value of an operation in all operable cases, he does not come to the violent conclusion that every case of appendicitis must be cut down on and removed. If for no other positive merit—and the book, as intimated, possesses many such—the volume would be entitled to a cozy corner in the general practitioner's library because of this negative virtue already many times hereinbefore recited. As to its reception by the surgical craft there is no conjecture, unless indeed the author be rent in twain because of his moderation, his homeopathicity, and his hopefulness.

Globules.

Never leave a parturient patient if she yawns or gapes. It is a certain sign of hemorrhage.

After an abortion the patient should be kept in bed three times as many days as the number of months of the abortion.

One of the best cures for red eyelids is to bathe them in water in which is a little powdered borax. This simple lotion is almost miraculous in its effects.

Always avoid purgatives in treating a patient who has swallowed a foreign body. Give opium and constipating food—boiled eggs, cheese, puddings, potatoes, etc.

Quite recently in California, a physician sent in his bill for professional services, charging for sixty-six visits covering a period of thirteen months. Payment of the account was refused, on the ground that the visits were too frequent and not at all necessary. The highest court in California decided for the plaintiff, and said that it would be very unfortunate for the sick if the physician was compelled to prove the necessity of each visit before he made it. In undertaking to treat a patient, it was decided that the physician contracts to give him reasonable care and attention, and in the event of neglect would be liable for the consequences.

Tincture of capsicum is recommended by the *Clinical Chronicle* as a most effective topical application for herpes labialis (cold sores).

If correspondent signing himself as "Anxious Father" will address S. O. Woodruff & Co., 108 Fulton Street, New York, a satisfactory answer will be possible.

The *Lancet-Clinic* says: to revive one who is "dead drunk," give five drops of aconite tincture in a teaspoonful of water. One dose is sufficient, as a rule. Or 3 or 4 drops of ammonia in a glass of water; but drink no more after that!

Balsam of Peru is frequently recommended by midwives as an outward application for sore nipples, and, in a case referred to, although it was wiped off every time before nursing, yet enough remained behind in the mammary fissures to give the infant an acute gastric catarrh, which carried it off in seven days.—*Druggist's Circular*.

When we are satisfied it is time for delivery to take place, and inertia has supervened, instead of resorting to forceps, thoroughly aseptinize the hand and after administering a little chloroform, introduce it gradually into the vagina. In a few moments pains will start up and increase in severity—sometimes to such an extent that the hand has to be quickly withdrawn.—*N. Y. Med. Jour.*

Never neglect to pass your hand over the patient's belly in typhoid, or any fever, injury, or fracture of the spine, compression, etc.; for the bladder may be atonic and injuriously distended without distress.

Never use force in passing a catheter in fractured spine, because of the *insensitiveness* of the urethra.

Do not forget that irritability of the bladder is often due to renal irritation and reflex actions.

Never inject more than four ounces at a time into the bladder, and that only with care.

... The foregoing has been given as the characteristics of baryta carbonica. They are good as far as they go, but the doctor did not go far enough, as many of the symptoms and conditions may be met by various remedies. What we, as students of *materia medica* need to know, and have fixed in our minds, is the picture of a remedy. What does this or that remedy look like? As there are no two individuals alike, there are no two diseases alike, neither are there two remedies alike. I grant you there may be individuals similar, diseases similar, and remedies similar in action, but not alike. Now in the first place, in learning a remedy we want to get its nature fixed in our minds. There are guide-posts or finger-boards to point us in the right direction.—C. W. Enos.—*The Critique*.

In several cases of disease of the muscular structure of the heart applying at Dr. Cohen's clinic recently, the system of gently resisted exercises, known as the "Schott movements," was prescribed, and an interesting demonstration of the method was given. These movements dilate the peripheral vessels, thus enabling the heart to empty its chambers more readily. Through reduction of the back pressure, the circulation through the lungs is facilitated, and the right heart more thoroughly emptied, which in turn assists in the onward flow through the arteries. Thus a beneficial circle is substituted for the vicious circle leading to dilatation of the heart, pulmonary engorgements, and dropsies, and, in consequence, these conditions are relieved, and, after a time, practically removed.

A dozen leading homeopathic physicians of Columbus, O., met at the office of Dr. A. B. Nelles on East State Street last evening and formed the "Columbus Homeopathic Medical Society." The meeting was very enthusiastic, and a constitution and by-laws were at once adopted. The officers are as follows: Dr. M. P. Hunt, president; secretary and treasurer, Dr. A. B. Nelles; board of censors, Drs. W. B. Carpenter, C. H. Schultze, and M. F. Cole.

The society will meet semi-monthly for the discussion of papers and clinical cases presented. Physicians throughout central Ohio will be invited to membership, and an active policy will be pursued toward the advancement of the interests of the homeopathic profession in the city of Columbus and surrounding territory. Meetings will be held at Dr. M. P. Hunt's office, No. 200 East State Street.

Beginning with the first of the new year, Dr. Wilson A. Smith of Chicago will assume editorial control of the *Medical Visitor*. We are pleased to welcome our good brother back to the fold. He has repeatedly shown the profession of what quality his pen is made, and his return to the pen-profession will make one more of our journals a first-class, newsy little journal. This is not to say, directly nor by implication, that Dr. Temple S. Hoyne, the many years' editor of the *Visitor*, does not understand the conduct of a live journal, for we all know that he does; it does mean, however, that Dr. Hoyne has had very little to do in the past few years, editorially, with the journal over which he nominally presided, being absent in Europe several times, and also much engaged in other work; so that the *Visitor* has been at the mercy of assistants, who, from the very nature of things, could not be as enthusiastic as the proper editor would be. Dr. Smith was for a considerable time editor of the *Current*, where he did good work; and, later, during the severe illness of Dr.

Fisher, he was *pro tem.* editor of the *Medical Century*, in both of which assignments he made himself popular with the profession. We look for an overhauling of the policies of the *Visitor*, and an introduction of up-to-date, wide-awake professional ideas.

A man out in Kansas obtained some pills at a drug store for the cure of insomnia. That night in the dark he found what he thought was the pill box and swallowed, as he supposed, three of the pills. He then slept soundly. In the morning it was discovered that he had gulped down three of his wife's shirt-waist buttons.

Be careful not to dismiss your patient too soon. A late Iowa Supreme Court decision makes a physician liable for damages accruing from his having dismissed a case too soon. This case must have been poor pay. It is a strange thing, and invariably true, that the people who are more exacting, give the physician the most trouble, want more attention, always wishing a consultation, never fail to send for you just after you have sent your carriage to the stables, are the most reluctant in settling their accounts. A rich man is usually a stingy man, and a stingy man will suffer with the colic from midnight till day rather than pay a night fee.

A Use for Patent Medicine Literature.—It is a favorite axiom of the optimists that everything has its uses (*Jour. Amer. Med. Assn.*). But it has remained for the New Mexico Territorial Board of Health to find a use for the patent medicine almanac. In a recently issued circular on the prevention of consumption, among other things, it is advised that "every person so affected should spit into some receptacle and should see that the sputum is soon destroyed by fire. About the house there is no better way than to spit between the leaves of patent medicine almanacs—to be had freely at all drug stores—and after a half-dozen or more spittings burn the book."

The *Georgia Eclectic Medical Journal*, published at Atlanta, a good journal of its school, which we have read whenever it comes to our table, ought to be above permitting a patent medicine company using any one of its issues for advertising their Glycerine Compound Truck as it does in a recent number. An honest advertisement in the ad. pages, or even a warm-blooded reading notice in its place, is not ultra-objectable. But several pages of this nauseating stuff, blue-penciled in order that the offensive thing may not possibly be unnoticed is—well, rubbing it in! Besides, we have gathered the thought from other of the journals of this school—and uniformly they are good reading—that eclecticism doesn't believe in nor

advocate compounds of this, that, and the other form of the old-school pharmacists. How is that, Brer Scudden—editor of one of the cleanest and newsiest journals which comes to our shears?

Poor Mrs. Jones ran a needle into her hand and the doctors had to open every finger trying to find it.

Tommy—What made 'em do that? Why didn't they get her a new needle?

A traveler in Algiers once asked a Moorish woman if when ill she consulted a doctor, "Oh, no," was the reply, "we go to the Moreabout. He writes a few words from the Koran on a piece of paper, which we chew and swallow with a little water from the sacred well at the mosque and we need nothing more. We soon recover."—*Official Surg.*

In speaking of the hasty diagnosis of senile cataract, Dr. Hansell calls the attention to the reflection of light by transparent lenses in elderly persons, and particularly in those belonging to the African races. The gray color of the pupil is often misleading, and may influence the physician to express his opinion that cataract is present, when further examination with oblique light, and with the ophthalmoscope, will at once convince him that his diagnosis is erroneous.

The Standard Fire Brick Company of Denver advertises kodaks and photographic materials. A well-known grocer of a northern Ohio village is also the village undertaker. One of the Cleveland morning papers chronicles the arrest and punishment for assault of one "Kid" Ryan, who is professionally a dog-catcher and a piano-player. Reminds you, does it not, of some of your outings in the country, when you were sent to the drug store for tinware, and to the barber shop for shingle nails and A-sugar?

The will of the late Edmund Yates, journalist, provided that his jugular vein be opened immediately after he should be pronounced dead, to prevent any possibility of his being buried alive. A legacy of twenty guineas was left to the medical man performing the operation.—*Ex.*

Ever think how horrible this is? In our own experience we promised a dying consumptive lady that one day after her death we would cut the wrist artery. We did it—but, excuse us! we went all alone into that chill chamber of death. Suppose that artery had been alive!

The American Homeopathist.

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The American Homeopathist.

NEW YORK, JANUARY 15, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



J. A. MCGEE, M. D.,
Virginia, Ill.

THE DUTY OF THE MEDICAL EDITOR.

THE receipt, latterly, of certain cautionary but withal friendly letters from American Institute members, reviewing our policy of criticising the American Institute, gives occasion to say now and here, publicly, what we have many times said in private. A close observer of much that goes by the name of medical journalism soon learns to gauge the value of such literature, and is not for any very long period of time taken in by it. It is evident to the clear-thinking man and woman that in many

cases the pseudo-medical journal is naught save an advertising sheet, only thinly glazed over and gilded, of some pharmacy, or college, or hospital, or society, in the which the editor has no opinion, or if he had and dared express it, his head would speedily fall into the basket—unless, as in the case of Professor Andrews and Brown College, public opinion was too strong.

* *

ABOUT *The Homeopathic Whitewasher*: Is it worth the price of the subscription to learn in letter-perfect and most inoffensive English that OUR college has had one of the most instructive sessions in its history; that OUR society on the Stanislaus has taken in—in every sense of that expression—963 new members, and held 'steen sectional sessions; that OUR pharmacy is now ready to provide all manner of green things, tinctures, combination tablets, and the like in sealed, plain envelopes; that OUR eminent spay-necologist last month took out thirteen ovaries and ninety-seven uteri; that OUR alma mater still presses in the friendly preacher from the little church around the corner to construct and deliver its faculty address; that OUR hospital still wants flowers and drawers and apple pie, as well as towels and linen and novels for the nurses; that OUR cases are invariably most fearfully desperate ones and are always cured with one dose and very, very high? Or, on the other hand, is the editor's duty done when he permits and presides over the printing of several pages of bloody but brilliant operations, done under the protecting ægis of modern fads; of clinical reports always under the "Service of OUR eminent specialist Professor Rippe M. Oute, A. M., M. D., Corresponding Member of the British Homeopathic Society," and many others; or in the frequent repetitions of cut-and-dried *materia medica* lectures? Is this medical journalism?

* *

THE editor of the AMERICAN HOMEOPATHIST served some time of his younger life in apprenticeship to newspaper reporting and editing, and he there learned the lesson that a news-

paper to be popular must be rigorously independent in all things that concern the general public—the greatest good to the greatest number; that it must steer clear of the style of the *Whooople County Palladium* with its fulsome and nauseating thanks for the latest large cabbages, or hand-painted Easter eggs, or newly gathered mince pies; that its chief and only duty lies in the giving of the news of the day to its subscribers who pay therefor. Some of the better of the metropolitan journals have found an imperative need to tell the truth and shame the counting-room. We all know what the *New York Sun*, the *Globe-Democrat*, and several of the Chicago dailies have done in the interests of liberty of opinion, and are ready to do again should the emergency arise. And this same spirit of honorable journalistic independence we have sought to introduce into the conduct of this journal. Is the medical editor so totally different from the newspaper editor that he may not point out any obvious ophthalmic obliquity though the beam be in the eye of some member of his own professional household? Is the title of editor appended to the name as are the buttons on the back of his princelbert, mainly for style? Shall medical journalism be classed with the old-time religious weekly, or the not very ancient political daily, whose geese were all swans, whose opponents were invariably double-dyed villains, liars, and horse-thieves?

* * *

TO descend from generals to particulars. Take that editorial of ours on the question of the American Institute indebtedness: Where was the wrong in calling attention to that? The treasurer had, the year before, publicly spoken of the shortage; and only after months of silence did we re-open the question and show the apparent cause thereof. Then, that question of shorthand reporting for the Institute. We had heard many complaints concerning the crass inefficiency of the recording secretary and his assistants; we knew where the trouble lay, and, therefore, finally, almost in desperation, told the truth—and were not commended for so doing. Again, in that editorial on the *Materia Medica* Conference. Are we to be muzzled on its iniquities simply because several wheelhorses of the school (among whom are some of our warm personal friends), are mistakenly directing that devastating work? What did it accomplish at Detroit; what at Buffalo? Has it not left an almost ineffaceable trail of distrust and dissatisfaction? Is it nothing to the profession at large, who depend for their living upon their medicine case and not upon their brilliant technique, to have the props knocked out from under them? Isn't it the homeopathic *materia medica* that

distinguishes us from the surgeons and spay-necologists of all the schools; and if that fountain is fouled at its proper source, the American Institute of Homeopathy, may we not speak in severe protest of such work?

* * *

THEN there was that more recent editorial calling the attention of the Institute *at large* to the special action of the special subcommittee of the Intercollegiate Committee, which the former in an arbitrary manner threw the weight of influence of all the on-the-inside colleges against the admission of a new school? Finally, about the Seniors: Is it not apparent to anyone who reads the signs on the several journals, and who has listened to the murmurings in the Institute, that there is a constantly augmenting dissatisfaction with that honorable body? We number many of our warmest personal friends among the Seniors; but that does not blind us to the patent fact that, as at present constituted, the Senate of Seniors is unpopular and might be changed. Was not our editorial timely and our criticism just?

* * *

THESE are some of the editorials which our warnful friends have pointed out, declaring that such outspokenness is perilous to our Institute position. Well, pray, what was our duty in these premises? To keep quiet—to see nothing, to know nothing; then, was it our duty instead to write inspiring and soul-uplifting editorials about the remarkable prevalence of toothlessness among the infants in New Orleans and Ecuador; or of the epidemic of alopecia which is raging in the midst of the baldheaded men of Chicago, Bolivia, and St. Petersburg? Or was it to belabor in diarrhetic English that most fearful of your modern wild fowl, the allopathic straw man? Is this homeopathic journalism within the intent and meaning of those words? Should not the shortcomings of the American Institute of Homeopathy, if it have any, be criticised, in order to bring about prompt and proper correction? Is it our duty to wait until an avowed enemy of the school stirs up its flagrant fragrance? If the friendly homeopathic journalist may not enter this garden of flowers and pluck out here and there a noisome weed which mars the beauty and symmetry of the whole, who may?

* * *

THE AMERICAN HOMEOPATHIST believes it has the right—nay, that it is its duty, and for which its subscribers pay, to tell the truth about any greater or lesser institution in our school, and the motto on our cover page will continue to govern our editorial pen.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

A Cough of *Corallium Rubrum*.—Dr. H. O. Rockefeller² treated a boy of ten, afflicted with a cough just like the barking of a dog. His cough produced so much alarm in the waiting room that several thought the boy had hydrophobia and kept watching him all the time he was there. He had a dog which had a similar cough and died on April 22, 1897, and on April 24 the boy began with this cough and continued coughing incessantly ever since, not giving him any rest during the day, but at night while asleep he would be free from cough, only on the morrow to resume the cough again.

The boy had never been bitten by the dog, which was a large St. Bernard four years of age. He never played much with the dog. The next day after the death of the dog the coop was cut up and the boy carried the wood in the house, and on the following day he began with this peculiar cough.

Atropine had suppressed the cough, while its physiological action lasted. Belladonna gave no relief, so *corallium rub.*, 3x trit., was given.

In three weeks he called and was much improved, and said he was better each day than he was the day before. Had him to continue with the same medicine, but not to take it as often as before.

He did not call again for two weeks, when he informed me that he had been free from the cough for two days at a time, and as he was out of the medicine came for more. Gave him more of the same medicine and have heard good reports from him several times since, and his mother informed me on November 15 that he has been free from the cough since the middle of July.

Pilocarpine IN NIGHT SWEATS OF PHTHISIS.—Dr. D. H. Weaver was called to a case of consumption, finding a lady who had not been out of bed for twelve weeks. With the lungs almost entirely gone, there was no hope of recovery. Dr. Weaver therefore prescribed

with a view to relieving some of the most annoying symptoms, of which profuse night sweats were the worst. The garments and bed clothes were made wringing wet nightly, and the patient was much exhausted. A number of prescriptions of what seemed the simillimum were without results. Thinking of the physiological (so-called) action of pilocarpine, he put three drops of the fluid extract in a half glass of water and directed her to take a teaspoonful every hour, from 6 to 10 P. M. The effects were magical. She had no more night sweats for a week, and afterward they were always controlled with the pilocarpine until she died, ten weeks afterward. Pilocarpine was the simillimum.

Ignatia IN EPILEPSY.—Dr. Hillberger³ reports the following case: A girl from Dalmatia, eighteen years old, with a genuine Italian constitution, very vivacious, excitable, finely cultivated, formerly always in good health, for the last six years, ever since the commencement of her catamenia (in Italy this precocious maturity is not rare), had to suffer from cramps and pains as often as her monthly period set in. Four years ago, in consequence of a fright, she had a fit like tetanus, lasting several hours; this occurred almost regularly since every two months. These attacks, resembling tetanus more and more, took the form of epileptic fits, with severe convulsions and syncope. The free intermissions became ever briefer, so that they finally recurred almost every month or immediately after the menstruation; and at last they appeared at every casual occasion, when the patient became strongly excited. According to the practice of the physicians in Dalmatia she had been treated with frequent venesections, which, of course, only aggravated her case. Later she received valeriana and zincum, and finally ferrum and lapis infernalis in pretty strong doses, but all in vain. For a year before I undertook her case, weary of the unsuccessful former treatments, she had not used anything. Immediately on taking her case I gave her *ignatia* 6th, 3 pellets every evening, and after using this remedy alone for two months she was perfectly cured, and remained so until three years later, when she died of acute pulmonary tuberculosis lasting three months, the cause of which was unknown.

Proving of *Anacardium* φ .—Dr. M. Louise Turton,² while running up the drug in her office, let a few drops fall upon her hand, and, without thought, touched the left side of her face. The next morning the left eye was swollen and inflamed, having paroxysms every half hour of great burning and itching, which would frequently last about five minutes, and, passing off, leave no other symptoms than a feeling of fullness and heaviness. The following morning the face was greatly swollen, the eyes almost closed, the skin leathery to the touch. By the third day the condition simulated that of erysipelas, without the fever. To the naked eye there appeared only a smooth, deeply red surface of the epidermis, aggravated by cold air; but, on touch, a sticky substance oozed out, which showed evidence of very minute vesicles.

After five days the œdema subsided, and desquamation in small flakes occupied several days. The affected parts were the face and small portions of the neck and back. The hand escaped; apis and arsenicum did good work in a short time. The eruption resembled rhus tox. poisoning, which had on three occasions occurred in the doctor, but the oozing of a sticky substance was lacking in the rhus eruption.

Chloride of Ammonium IN DELIRIUM TREMENS.—“Some time ago,” says Dr. W. Bourne Gossett,²³ “I was called to see Mrs. —, a lewd woman. She had been on a drunk for eight days, and just before I saw her had had the usual reptile hallucinations. I found her very restless, moving incessantly, and by force she was made to stay in bed. At once I sent to a neighboring drug-store for a dram of chloride of ammonium, but before getting it she was beginning to get more excited and seeing ‘snakes.’ As soon as I got the ammonium I at once gave her half a dram in a large quantity of water—four ounces—and had her drink it in one or two gulps. In fifteen minutes she was quieter, and in fifteen minutes more I gave her the other half dram. In a short time she was asleep, and slept for six hours. She awoke feeling much better, and had no more trouble. I should not hesitate to give a dram, and repeat the dose in half an hour, if the patient was not better.”

Carbo Vegetabilis IN COMA.—A patient with chronic Bright's was brought to the notice of Dr. M. Louise Turton when brain symptoms were so rapidly coming on that coma occurred three hours later. The radial pulse was imperceptible, her lower jaw dropped, there was no reaction to the pupils, the body was covered with cold sweat, the features were sunken, in fact a perfect picture of death presented itself.

Although it seemed almost useless, carbo veg. 3x was advised. A small powder was placed in half a glass of water, and administered in teaspoonful doses. In ten minutes after the first dose she could see a slight change. By the third dose the patient opened her eyes, began to be warmer, the pulse became strong, and from that hour she made a rapid recovery. One year from the date of her serious sickness, she was bright, strong, and happy and as intelligent as before her illness.

HAHNEMANN AND HIS RELATIONS TO PSYCHOLOGICAL MEDICINE.*

By SELDEN H. TALCOTT, A. M., M. D., Ph. D.,

Superintendent of the State Homeopathic Hospital,
Middletown, N. Y.

NEARLY a century and a half ago a little child was being rocked in a tiny cradle by its fond and hopeful mother in the village of Meissen, Saxony. One of the angels was swinging upon the gates of Paradise, and, looking down, she beheld this child, and was entranced by its wonderful beauty. So she plucked from her own soul the spirit of goodness, of purity, of angelic enthusiasm, and of heavenly wisdom, and she dropped it down into the heart of the little child. Whoever has studied the life and work of Samuel Hahnemann will recognize, in his every word and act, the presence of that lofty spirit which came to him from the hands of his ministering angel.

Hahnemann's father declared to his friends, concerning Samuel: “If that boy is permitted to live, I will give him lessons in thinking.” He took those lessons, and, like the immortal Goldsmith in literature, the master of home-

* An address delivered at Cleveland, O., November 15, 1897, before the members of the Homeopathic medical profession.

opathy left nothing in medical philosophy untouched, and he touched nothing which he did not adorn.

In the development of his mighty mental powers, Hahnemann became (1) a student ; (2) a scholar ; (3) a thinker ; (4) a discoverer ; (5) a teacher ; (6) a physician ; and (7) a psychologist.

He sprang the arches of thought over these seven pillars of medical architecture, and united them into one grand stately masterpiece, even as Michael Angelo reared that marvel of architectural beauty and glory for all the world in the magnificent dome of St. Peter's.

Hahnemann was not satisfied with the acquisition of knowledge common to the schools of his day. He sought a larger knowledge than that which had been developed in his time. He formulated principles which he deduced from knowledge, and fashioned them into shapes of heavenly wisdom. Who can estimate the influence of such a man in his efforts to raise the practice of medicine to the sublime heights of a truly healing art? This man, in the performance of a heaven-born duty, worked alone, uninspired save by a constant sense of the possession of a mighty truth. With that truth in his heart he rose like a giant from the ranks of the people, seized this stupendous, inert mass of antique theory and uncertain conjecture, and hurled it into the gulf of a yawning oblivion. He pointed out the folly of old-time methods of treating the sick by rash and blindly heroic means. He proved the powers and actions of drugs upon himself ere he ventured to administer them as medicines for the sick. He reduced the size of the dose until he saved his patients from the dangers of drug aggravation. He covered Europe with the evidences of his marvelous skill ; swept back the tide of long and bitter persecution by the sublime triumphs of his art ; kept up the glorious carnival of his successful practice until he was crowned with surpassing honors in Paris ; and he rested not until his admiring friends were impelled to erect a stately monument to his name in the famous city of Leipsic, a city from which, on account of his medical discoveries, and the fanatical tendencies of the times, he had been driven as a fugitive and a vagabond. That monument still remains

in one of the chief parks of the beautiful Saxon municipality, and it stands unto this day as a fitting memorial to his magnificent and imperishable memory. Another monument to the honor of the master will, I trust, be erected in the near future in the stately capital of these blessed United States. The accepted model for this new monument not only inspires us with renewed reverence for the Sage of Coethen, but it reflects likewise new glory upon the already illustrious achievements of American artists.

The outlines of Hahnemann's work, as they lie in stately silhouette against the far horizon of the past, give evidence of the majestic and solid worth of his underlying achievements, and of his far-reaching influence in the domain of medicine. The crowning glory of Hahnemann's efforts culminated in those twin peaks of achievement which point forever toward the zenith, and which shine resplendent like the stars. The first peak represents the discovery of the effects of drugs upon the human mind ; and the second peak represents the establishment of an asylum for the treatment and cure of mental disorders.

Hahnemann found, in his task of proving drugs, that nearly every remedy in the *Materia Medica* has some effect, more or less profound, upon the various mental activities. In all his provings Hahnemann laid especial stress upon the mental action of drugs ; hence, we come naturally to associate the name of the master with the latest evolutions and 'developments in psychological medicine.

To exemplify the truth of the assertion that drugs produce effects upon the mind through their action upon the brain, we have only to refer to the ghastly and agonizing fear of death which is caused by aconite ; to the hot, pugilistic, and bellicose frame of mind in which we find the belladonna patient ; to the intense restlessness, anxiety, and suicidal propensity of the arsenicum patient ; to the hilarious, erotic, reckless, jolly delirium of hyoscyamus ; to the frenzied fear and abject cowardice of stramonium ; to the ideational and ecstatic delusions of opium ; to the unchained imagination and limitless extravaganzas of cannabis indica ; to the profound and abject despair of salvation

which accompanies the physical collapse of veratum alb.; and to these might be added the mental effects of actea racemosa, and calcarea carb., and rhus tox., and veratrum viride, and nux vomica, and ignatia, until we might say of each victim of these various drugs :

"He walked with demons, ghouls, and things
Unightly ; terrors and despairs ;
And ever in the blackened airs
A dismal raven flapped its wings."

Some drugs of the *Materia Medica* can, indeed, by their fell influence, cast their victims into deepest hell; while others inspire him to rise to the loftiest peaks of ecstatic joy.

Recognizing the fact that drugs affect profoundly all parts and conditions of the human mind, and recognizing the fact that through these drugs, in attenuated doses, the mind may be calmed and relieved of its perturbation, and restored to its normal state, is it any wonder that Hahnemann should found an asylum for the care and cure of the insane? In 1792 this famous psychologist established an asylum at Georgenthal, near Gotha, and there he not only administered healing remedies for the relief of "minds diseased," but he introduced to the world that happy and harmonious associate of homeopathic medication—namely, kindness to the insane.

Concerning the moral hygiene of mental invalids, Hahnemann wrote, in his *Lesser Writings*, that oft-quoted and beneficent golden rule for the sick in mind: "I never allow any insane person to be punished by blows or other painful corporeal inflictions, since there can be no punishment where there is no sense of responsibility, and since such patients only deserve our pity and cannot be improved, but must be rendered worse by such rough treatment. . . The physician of such unfortunate creatures ought to behave so as to inspire them with respect, and at the same time with confidence; he should never feel offended at what they do, for an irrational person can give no offense. The exhibition of their unreasonable anger should only excite sympathy, and stimulate his philanthropy to relieve their sad condition."

The introduction of the golden rule of kindness in behalf of the insane was made in the

face of a long established custom of dealing with the insane as if they were criminals deserving of stripes, and of bondage, and of imprisonment in close-barred and heavy-walled dungeons. The world was beginning to move in the right direction even in Hahnemann's time, and while he was at work in Germany trying to better the condition of the mentally sick, that other great philosopher and psychologist, Dr. Pinel, was organizing his revolution for the benefit of the insane at the Bicêtre, in Paris. Pinel struck the shackles from the insane in France. Hahnemann not only kept the shackles away from the limbs of his patients, but he introduced means and measures of a medical nature for the relief and cure of mental bondage—that bondage of mind which is characteristic of insanity.

It is an interesting fact that each portion of the brain has its specific and special duty to perform. This fact has been demonstrated by the experiments of Fleurens, of Longet, of Velpeau, of Ferrier, of Hitzig, and others. By removing certain portions of the brain in some of the lower animals the power of the remaining portions may be determined. When the upper lobes of the brain were removed from a pigeon, that bird was deprived of the powers of memory and will. But it could fly when thrown into the air; it could be roused by a push, by a light flashed before its eyes, by ammonia held to its nostrils, by a pistol discharged close to its head. But when left undisturbed, it seemed to be in a profound sleep. By removing another layer of the brain, the faculty of sight is destroyed, while hearing remains. By removing another layer, the faculty of hearing is destroyed; and again, the power of motion is paralyzed, and so on to the end of the chapter. When we come to excise that center from which the pneumogastric nerve springs, then the heart and lungs are paralyzed, and the animal dies. This is true in the case of all animals except that of the frog. A frog can live for a short time by what is called cutaneous respiration. A frog may be decapitated, and all nerve centers removed, except those located in the spinal cord; then if the surface of the abdomen is irritated with a drop of sulphuric acid, an attempt will be made by the frog to remove the irritating substance by rub-

bing it off with his right leg. Now cut off the right leg, and you will see an attempt to reach the irritated part by using the stump. Not succeeding, the animal will pause and think it over with his spinal cord, and then you will see him try to remove the acid with his left leg. If a frog can think with his spinal cord, why may not a man do the same thing?

The localization of brain function has been proved by applying the galvanic current to different portions of the exposed brain in the case of a monkey, and carefully noting the effects. The various brain centers, which control the actions of the legs, and arms, and trunk, and face, and tongue, and eyes, have all been determined by scientific experimentation. The relations of psychological medicine to brain localization are apparent when we consider the fact that one drug will produce paralysis of the right leg, while another drug will produce paralysis of the left leg, and still another will produce paralysis of the throat and tongue, and yet another, paralysis of the eyelids. Hence, in applying a remedy for the relief of diseased conditions in any part of the nervous system, we should know, first, where the injury is; secondly, the nature and character of the symptoms developed; and thirdly, what drug in the *Materia Medica* will produce a similar train of symptoms when a proving is made, and likewise afford relief to the symptoms presented by the patient in hand.

When we pass to a consideration of the brain as a seat of mental power, we find it the temporal kingdom of the mind, the earthly tabernacle of the immortal soul.

Within the convolutions of the brain rest not only the power of guiding and propelling the physical forces of the body, but also therein is the seat of a higher power which enables man not only to control his own actions, but to influence and direct the actions of others; to oppose successfully his intellectual vigor and prowess against the crude strength of the lower animals, and against the combative elements of earth, and sea, and air.

Man's mind, in the first place, takes cognizance of external things through impressions and perceptions. These lead to comparisons, and thoughts, and the generation of ideas. The

fruits of cognizance are stored up in the wine-press and vaults of memory. From these come forth, at last, the rich essence of understanding and judgment, the final results of a mysterious and subtle process. The will executes the conclusions and the mandates of the understanding and the judgment.

The ancients thought that the brain was but a useless mass of crude matter; a sort of overgrown clam; a mountain snow-cap to keep the rest of the body cool. The modern student, however, finds that the brain, which the ancients despised, has become the chief and most important organ of the body. The human mind, the occupant of this brain, is the marvel and the mystery of creation. It is stirred by every flitting passion or impression, and yet it is held in steady poise by the calm monitions of reason, of cultivated judgment, and of developed will. In these respects, it resembles those wondrous rocking-stones reared by the ancient Druids. You remember that they were so finely balanced that the finger of a child could vibrate them to their centers, and yet they were so firmly poised that the might of an army could not move them from their base. So it is with the human mind which has been thoroughly trained, carefully cultured, and kept by its owner as a pearl with out price. The smile of a child can sway it to and fro, while the fagot of martyrdom could not change one jot or tittle of its firm determination.

To Samuel Hahnemann, "the grand old man" of homeopathy, is due the honor of having been one of the great discoverers of the *sensitiveness* and the *stability* of the human mind; and the discovery of these facts led this wonderful healer of the sick to successful issues in the treatment of both mental and physical diseases. This recognition of the qualities of *sensitiveness* and *stability* of the mind led the healer of Leipsic to consider, with far-reaching effect, the power of drug action in the relief of mental disorders; and this clear discernment of the comprehensive healing effects of drugs led to a sublime and successful ministration to the wants of a "mind diseased."

The proving of every drug reveals a hidden power for the disturbance of mental equilibrium, and its application as a remedy shows likewise

a power for the restoration to its normal state of a disturbed mental equilibrium.

Samuel Hahnemann not only discovered and enunciated the principles of homeopathy, but he discerned, likewise, the complicated and kaleidoscopic conditions which exist when mind and matter harmoniously mix within the convolutions of the human brain. His first experiment of curing the insane by applying the law of similars was overshadowed by his yet sublimer triumphs in other fields of effort ; but he left the record of a short, successful experiment in psychological medicine ; and this record, like a pearl exhumed from the depths, is beginning, at last, to reveal its true worth to the world.

In humble imitation of the example set by Hahnemann, the State of New York established, more than twenty years ago, a homeopathic hospital for the care and treatment of the insane, and the experiment of a double decade has been so satisfactory and so successful, that another hospital in my native State is now being erected for the care and cure of the insane by homeopathic methods. New York has two State homeopathic hospitals for the insane, Massachusetts has one, Minnesota one, California one, Michigan one, and Missouri one ; and we hope that our grand sister State, Ohio, will soon fall in line in this beneficent work of medical reform, and establish within her borders a State homeopathic hospital for the insane.

Perhaps you will be glad to know something of the work which has been accomplished in the task of caring for the insane in other States by means of homeopathic medication, and I will endeavor to aid you in your search for knowledge by the administration of a few brief statistics.

The first table shows that the percentage of recoveries on the number discharged in the old school institutions of New York State for eight years was 29.48. At the State homeopathic hospital at Middletown for the same period the percentage of recoveries figured on the same basis was 49.89.

The percentage of deaths on the whole number treated in the old school hospitals for eight years was 6.13 ; while the percentage of deaths at the Middletown State Homeopathic Hospital for the same period was 4.06.

It was asserted at one time that Middletown

sent large numbers of unimproved patients to the State hospital for the chronic insane, and thus we lowered our death rate. An investigation showed that the old school hospitals for the acute insane transferred to the Willard State Hospital for the chronic insane as unimproved 11.50 per cent. of their patients, while at Middletown we transferred as unimproved only 5.98 per cent.

Another method of comparison was instituted, and we present herewith a table showing the whole number treated in the various State hospitals from the time of opening those institutions down to September 30, 1895. This includes all the patients treated in all the hospitals of the State to the date already given, and this covers a period of about fifty years. By this comparison, we find that the percentage of recoveries on the whole number treated in old school asylums was 23 per cent., while at the Middletown State Homeopathic Hospital it was 36 per cent.

In Massachusetts the percentages are as follows : Old school asylums during a period of ten years the percentage of recoveries was 19.57 ; and the percentage of deaths 6.85. In the homeopathic State hospital at Westborough the percentage of recoveries during the same period was 29.18, and the percentage of deaths 6.50.

In Minnesota, the percentage of recoveries in the old school asylums for a period of six years was 30.36, while in the homeopathic State hospital the percentage of recoveries during the same period was 52.02. The percentage of deaths during the same period in the old school asylums was 7.04, while in the homeopathic State hospital the percentage of deaths was 4.27.

Other States are yet to be heard from, but the fair presumption is all in favor of homeopathy in every State where the experiment of thus caring for the insane has been tried.

After fairly considering the results attained in new school hospitals for the insane in several of the States in this Union, I am of the opinion that there should be a homeopathic hospital for the insane in every State, from Maine to California. There are three reasons why such institutions should be established :

1. Freedom of choice in medical matters is just as much an inalienable right as the right of freedom in the worship of God.

2. Homeopathsists pay a considerable proportion of the taxes in every State, and they have an inherent right to representation in the expenditure of those taxes.

3. Homeopathic treatment of the insane is, to many minds, a pre-eminently satisfactory and successful method.

In this land of liberty we select our own religious creed, and our own form of worshipping the Almighty, without hindrance from any source. In our everyday life we are permitted also to select our own preferred medical practice; and when afflicted with insanity our friends should continue that form of medical treatment which we would select if we were in our right minds. It seems to me a barbarous and an unconstitutional procedure to make an insane man a ward of the State, and then deprive him of his chosen and customary means for medication. We allow ministers of all creeds to visit asylums and hospitals, and offer religious comfort to those of their own faith. How can we consistently afford freedom in religious matters, and deny freedom in medical matters? Such a course is illogical in every particular, and should be abandoned at once.

Again, homeopathsists pay a considerable proportion of the taxes in every State, and they should have not only their share of the benefits of taxation, but they should, likewise, have a voice in the ultimate disposition of moneys raised by taxes. It was taxation without representation that roused the spirit of resistance against such tyranny in the hearts of our forefathers. It was rebellion against the injustice of taxation without representation that secured the establishment of this great American Republic where the spirit of universal and unlimited freedom pervades or ought to pervade every department of the government. The Constitution of the United States guarantees to all its citizens the right to "life, liberty, and the pursuit of happiness." How can you enjoy life when, in the helplessness of mental disease, you are deprived of the inalienable right of selecting your own medical means for the cure of disease, or of allowing your dearest friends to make the selection for you? I hope that this great commonwealth of Ohio—this famous lover of liberty and fair play, this foster-mother of presidents, this State

whose best citizens believe that virtue is the true nobility—will rise to the occasion and grant, in the near future, to each one within her borders a full and unreserved freedom of choice in medical matters, as well as in religious matters. I hope that you, the people, will soon establish within your borders a State hospital for the cure of mental invalids, in which the being and successful methods of homeopathy shall be administered.

My friends, we live in a marvelous age, a wonderful country, a magnificent and a glorious time. This is an age of discovery, of development, of invention, and of boundless energy; and in every advance the beneficent cause of homeopathy rides triumphant upon the crest of the tidal wave of progress. Homeopathy, in its subtle and not always fairly observed effects, produces clearer brains, more active minds, and longer lives and greater happiness than any other system of medicine known to man. When opium ruled the world, human progress was slow, dull, and uncertain. Stupefying drugs, used for the relief of disease, tended to benumb and paralyze the highest and noblest efforts of human genius. Hahnemann taught the people that disease could be cured without a resort to prostrating and paralyzing drugs, and when this lesson was fully disseminated, then the inventive genius of man grew to mighty and magnificent proportions. The enunciation of the law of similars was a proclamation of universal freedom to hitherto drug-enslaved minds. The method of administering small and non-aggravating doses of medicine has not only been successful in the hands of homeopathsists, but their practice has modified the customs of our old school brethren, and thus improved the general condition of humanity.

This nineteenth century of time has witnessed achievements of the human intellect which seem but little less than expressions of an infinite power. And as we near the end of the century, what wonderful developments we see as a result of the supreme efforts of the free human mind. To-day, the voice of man is breathed upon a cylinder of wax, and the music and eloquence of the present roll down the ages for the inspiration of future generations. Man snatches a sunbeam

from the mass of actinic rays, and with it he paints pictures with consummate art. He photographs the moving scenes of time at the rate of forty-seven pictures per second, and reproduces life and action with amazing fidelity upon the inert bosom of the white canvas. He sends electric messages that stir the hearts of nations upon tiny wires, or perhaps without wires, over the loftiest peaks of every continent, and beneath the emerald depths of the vast and restless oceans. The wizard of Menlo Park makes a machine with which he talks to his neighbor a thousand miles away as if he were addressing him face to face. The inventor of modern times captures and subdues the wild, unbridled forces of steam and electricity, and makes them willing steeds for the swift propulsion of his modern chariot. He builds Leviathans of the sea, and drives them against the opposing forces of wind and wave with unconquerable and marvelous power. Surely this *is* a progressive age; ours is a progressive land; and he must, indeed, be a progressive student who would keep pace with the onward march.

Amid all the discoveries of these latter days, and amid the inventions which belittle the stories of Aladdin's Lamp, the truth in medicine as proclaimed by Samuel Hahnemann looms like a mountain that is haloed by the majestic splendors of an autumnal day, and its glory shall continue unto the end of time. It is your duty and mine to explore yet more fully those realms of psychological medicine which were pointed out by Hahnemann a century ago, and which still present to the world everywhere the most glorious of Klondike possibilities. Homeopathy is a mountain mine of truth, and only a few of the surface nuggets have as yet been picked up and utilized. Let us continue to search for the truth, and let us remain faithful to the cause which we have espoused. Let us seek to acquire our rights in every State, and likewise avail ourselves of every golden opportunity for the healing of disease, for the accomplishment of good, for the dissemination of that which is most beneficent among mankind.

To accomplish any good work in this world requires an enthusiastic love for it, and a faithful devotion to it. Fidelity to a purpose is one of the noblest of all impulses to

final and glorious success. It was fidelity to a purpose that impelled Warren to a willing sacrifice of his life for the sake of freedom's cause at Bunker Hill. It was fidelity to a purpose that carried Ellsworth to a glorious martyrdom for the protection of liberty and union at Alexandria. It was fidelity to a purpose that stimulated Grant to fight his way through the battle hell of The Wilderness, and on to final victory at Appomattox. It was fidelity to a purpose that stirred the brave color sergeant of Mississippi to tell his colonel on the eve of battle: "I will bring back those colors in honor, or I will report to God the reason why." Such examples of fidelity to a purpose cheer, and strengthen, and encourage us all as we move on over the dry and dusty pathway of daily duty.

When William of Orange assumed a mighty rulership, he placed one hand upon the Magna Charta, and the other upon the hilt of his sword, and swore a solemn oath: "I will maintain." Let us, fellow workers in the cause, swear anew our allegiance to the loftiest purposes of our profession; and let us also store up in our heart of hearts another vow—that we will comply with the injunctions of the inspired writer, to "prove all things," and "hold fast that which is good."

JUGULAR VEIN CUT.—RECOVERY.

By Dr. B. F. LANDES, Burlington, Ia.

DURING a saloon racket in our town, on the evening of March 1, 1897, Sam. S., who had sold his saloon and was feeling strong and rich, tackled one of our countrymen, who was getting somewhat worsted in the mix-up, and who to defend himself drew a knife, and in making the third slash cut his antagonist on the neck, making a deep cut about four inches long, reaching the jugular vein. Realizing his danger and closing the wound with one hand, the wounded man ran to my office, about one hundred yards distant. At the first glance I was satisfied that the vein was cut, as the blood streamed from the wound as thick as a lead-pencil, not in spurts as from an artery with the pulsations of the heart, but in a continuous stream.

The handiest styptic was a bottle of tincture chloride of iron, which I poured into the

wound, and by the time I had two or three of the lookers-on thread some needles the patient had fainted and fallen to the floor. Pressing the edges of the wound together, I quickly put in nine stitches and applied absorbent cotton wet with the iron. I poured down him several spoonfuls of aromatic spirits of ammonia. In a few minutes he became conscious, and soon we could detect a faint beating of the pulse. The wound soon filled with coagulated blood, the stitches held nicely, and in six days they were cut and the clots turned out. The hole in the vein had closed, and Sam still gets drunk and rolls up his John L.-Corbett-Simmons' sleeves and wades into his foes if he doesn't see a knife. The surgical skill on my part was very unscientific, but had I tried to ligate the vein while he was in his syncopical condition, what blood he had left would have flowed away. I believe my bungling method saved his life.

PLEASURES OF A DOCTOR'S LIFE.

THE following are some of the sweets of a doctor's life. If he visits a few of his clients when they are well, it is to get his dinner; if he does not do so, it is because he cares more for the fleece than the flock. If he goes to church regularly, it is because he has nothing else to do; if he does not go, it is because he has no respect for the Sabbath or religion. If he speaks to a poor person, he keeps bad company; if he passes them by, he is better than other folks. If he has a good carriage, he is extravagant; if he uses a poor one on the score of economy, he is deficient in necessary pride. If he entertains, it is to soft-soap the people to get their money; if he does not, he is afraid of the expense. If his horse is fat, it is because he has nothing to do; if he is lean, it is because he is not taken care of. If he drives fast, it is to make people believe somebody is very sick; if he drives slow, he has no interest in the welfare of his patients. If he dresses neatly, he is proud; if he does not, he is wanting in self-respect. If he works on the land, he is fit for nothing but a farmer; if he does not work, it is because he is too lazy to do anything. If he talks much, "we don't want a doctor to tell everything he knows;" if he does not talk, "we like to see a doctor social." If he says anything about politics, he had better let it alone; if he does not say anything about it, "we like to see a man show his colors." If he visits his patients every day, it is to run up a bill; if he does not, it is unjustifiable negligence. If he says anything about religion,

he is a hypocrite; if he does not, he is an infidel. If he uses any of the popular remedies of the day, it is to cater to the whim and prejudices of the people to fill his pockets; if he does not use them, it is from professional selfishness. If he is in the habit of having counsel often, it is because he knows nothing; if he objects to it on the ground that he understands his own business, "he is afraid of exposing his ignorance to his superiors."—*Medical Council.*

Book Reviews.

"Karezza, Ethics of Marriage" is a new book by Alice B. Stockham, M. D., of Chicago, and partakes somewhat of the same general nature of her other famous book, "Tokology." Dr. Stockham possesses the happy Marie Corelli faculty of giving her books attractive, if not startling, titles. Though this word karezza is not to be found in the present dictionaries, it is safe to assume, judging from the contents of the book itself and its line of argument, that it is a made-over word from "caressing." This present book of Dr. Stockham treats of a subject in which every newly-married, society-loving, family-limiting couple is deeply interested. Her argument is to the point, if not always along lines of ordinary reason. If it is possible for poor, weak, sinful human nature to secure such absolute control over this most imperious animal passion as this author says it may do, as to hold it in check for from one hour to six weeks, then the matter of procreation of the species or, rather, the non-procreation of the same is a matter of easy accomplishment. But—no matter. And yet, this is an opportunity which should not be let slip to say something equally as plain as the author, and not altogether in her view of the case. It seems to us,—with no intended harsh criticism of this book, which has its place in every medical library,—it seems to us that if the author's views are practical, which in reality amounts to a limiting of the family, which, in turn, can mean but one thing: namely, the not having of *any* children; then the work had better not have been written. Modern civilization, meaning by that the civilization which reads and writes books of this metaphysical kind, is fast reaching the opinion that the having of children is an unnecessary obscuration of the marital rights and pleasures and no longer good form. Is not this so? You doctors of the better class, you who minister to the upper and wealthier class, is it not a fact that child-bearing is becoming less and less frequent? And that the population of these United States would be rapidly tending to extinction, were it not for the undue

activity of the lower and baser element in our times? If Dr. Stockham could compel the lower, the profligate, and debasing classes, the criminals to read and comply with her cohabitation maxims, then the end would be worthy the effort. But as it is, in the upper ten, there is already too much knowledge on the subject of limiting the family; far too much for the good of the American race. And the day may not be far distant, if our legislators close the doors upon emigration, when they will be obliged to offer prizes, as they do in France, for any family having more than the one chick.

The author of "Karezza" may argue that her safeguards are purely designed, surrounded with sentiment and Ella Wheeler Wilcox's latest poetry and only for married people, who for good and legitimate reasons have no wish for further or any family; but so was the old-fashioned "Marriage Guide;" that will not, however, restrict the sale of the book to just those people and to none other. But perhaps our heated imagination has conjured up unreal and impossible dangers for our race, for we dare to take issue with the learned author on the very *modus operandi* advocated. We do not believe it possible to so subjugate a natural and the most imperious animal instinct of the body by taking thought and time,—lots of time,—that one may destroy the very physiological function of the parts concerned; not any more than by taking thought and time, the hunger for corned beef and cabbage or a good cigar may be appeased and satisfied by a contemplation of theosophical problems or the intoning of low meter hymns. For just about the time the green-goggled horse had got used to eating shavings, he died! All Neurological Specialists know what the action is upon the spine and base of the brain in the following out of "Karezza." This is of course only a personal view, and a masculine view at that, of this subject. It is given for what it is worth; which may be little or nothing. Certainly the rules laid down in "Karezza," if it is possible to carry them out, are clean and wholesome. It is worth reading, in our estimation, as much for its elevated and uplifting style of composition, as for its attempt to poetize and deify what has been and will be to the end of time nothing more nor less than a vile animal passion of the earth, the very earthiest!

We have been in possession of the Pharmacopœia of the American Institute of Homeopathy since shortly after the adjournment of the Institute at Buffalo. But as we are not pharmaceutical in our inclination or education, we have not had much to say concerning this official book. It is the result of several years of labor by a committee of the Institute—appointed,

we believe, in 1888. The last head of this committee was Dr. Conrad Wesselhoeft, with Dr. J. Wilkinson Clapp as secretary. The committee was instructed to prepare a pharmacopœia which should have the authoritative sanction of the Institute, and in the preparation thereof it was to confer with a similar committee of the International Homeopathic Congress held at Basle in 1886, and also to use as a basis the British Homeopathic Pharmacopœia, and not to ignore any other source for the obtaining of fundamental facts.

In conversation with a local homeopathic pharmacist we were informed that the new pharmacopœia was disastrous to unity of methods; that it would take a long while before the profession would become accustomed to the new forms and rules. But possibly this may be attributed to a little irritability because it does not conform to the standard heretofore in vogue with this pharmacist. We hope it may prove the means of uniting the profession, and cause them to adopt one uniform standard in medication. It might thus be an ultimate solution of the vexatious potency question. Just at this juncture in the fortunes of homeopathy it is wise not to be too radical in proposed changes. There is a wide tide of distrust let loose upon the profession, by reason of some impolitic conduct on the part of accredited homeopathic committees. So far as the labors of the committee are concerned, there can be naught said but words of praise. It was a large task, and viewing the handsome book, the concrete result of these almost ten years of labor, it was well done. The price to any part of the United States, according to binding, is \$4.50 and \$5.25. It contains 676 pages, and is for sale through any homeopathic pharmacist.

Globules.

We are pleased to learn of the favorable reception which Dr. Howard Crutcher's recent book on appendicitis has met. The medical part, as we happen to know, was prepared with unusual care, as Dr. Crutcher, while a surgeon, is yet a homeopath and operates only when the case so demands. It has already received the commendation of such eminent men as Helmuth, Shrady, Boskowitz, Murphy, Comstock, and others.

Bell's "Diarrhea" in its fourth edition has been upon our book table since June. It has not been given a review sooner because it is a book that is most favorably known to the profession, and because it has neither added nor removed any remedy. So that it is practically as it has been in its former editions. The pub-

lishers, Boericke & Tafel, Philadelphia, have changed the form of the book, making it smaller in bulk and far more convenient for carrying. We can only refer to our former review of this book for our present opinion. It is one of the medical classics.

A plea for solidarity being the leading editorial in the December 31 *Homeopathic World*, printed and published in London, is a strong appeal to the homeopathic profession everywhere for a union of forces in destroying the influence against the law of similars. Dr. Clarke has drawn the advantages to be derived in vivid colors, and we hope the profession will give its undivided aid.

The physician's visiting list for 1898, published by P. Blakiston & Co., has reached our table. It seems almost unnecessary to say anything concerning this popular favorite. It is, as always in its preceding forty-seven years, filled with proper and compact information for the physician, in addition to its well-known system of keeping tab on the visits made from day to day.

Mellin's food holds its own in the homeopathic profession. It is a sure winner as it is always a favorite. It has long since ceased to be merely an infant food—although here it achieved its first laurels and caused a host of imitators to enter the field with other forms of infant foods; but it has latterly become a pronounced invalid food—good for adults wherever a milk food or a food for a delicate stomach is desired by the physician.

Another of those standbys for the physician who at some critical time in the life of a patient needs the help of a meat food is Bovinine. We know of nothing better than a teaspoonful to a teacupful of warm milk. Or, if milk is not desired, a little weakened claret wine, or sherry, makes a palatable drink food. Within the last few years it has been found that the local use of the Bovinine to open wounds and the like keeps the parts sweet and tends to their rapid healing, as well as to the filling in of lost tissue. A number of our best physicians have given testimony to this effect in literature which may be had on application. In a case of cancerous breast, or rather the open wound left after amputation, we had most excellent success in healing the surface with Bovinine. In another instance in a varicose ulcer in an aged lady, a sore that had been tinkered with for nearly a generation and without success, a few weeks' treatment with local application of this preparation closed up the surface and has made the leg stronger and healthier than for years. Now when an injury comes to our office, a cut or bruise, or there is need for an application per vaginam,—especially

in debilitated subjects,—we make use of Bovinine as a dressing and thus far with gratifying success.

Carbolic Acid Burns.—Apply vinegar or alcohol, and wash in running water.

Urinary incontinence as a uterine symptom is one of the earliest subjective signs of "falling of the womb."

It is stated that the mortality from diabetes is seven times as great among locomotive engineers as in other occupations.

For albuminuria of pregnancy Parvin advises an absolute milk diet, with lime water if necessary; also open bowels and frequent hot baths.

The Antikamnia Company is before the professional footlights with a second creation of Dr. Crusius in the way of a "skull"-calendar. In our estimation it is an improvement upon the one issued last year. The subjects chosen are unusually clever, and exceedingly well done. It goes without saying that Crusius has made something of a study of skulls. For to take a grinning skull and array it in expression with no other accessories than a possible pair of spectacles, bespeaks both professional and artistic knowledge of the first order. The Antikamnia Company, notwithstanding the host of petty imitators, continues to hold first place in the professional good-will. When the coal-tar products are in demand for a case, there is surely no more safe form of them than this same Antikamnia.

Talking about calendars for the physician, we have recently received one from the Tongaline Company, which has, on a large background, in lithographic process the pictures of twenty-one eminent men, either physicians or associated in that form of work and study. The pictures are very fine. They lack in but one regard, namely, that in the lot there are not to be found the "liniments" of a single homeopath. The thought has occurred, why do not some of these enterprising pharmaceutical firms, who tell the homeopaths that they find the homeopathic patronage a vast power and help, make a calendar and embellish it with pictures of members of our school?

They are sufficiently prominent, and our school is extending its influence far and wide. Why not publish the portraits of its more prominent practitioners, namely: T. F. Allen, Richard Hughes, Helmuth, A. B. Norton, St. Clair Smith, E. C. Price, Pemberton Dudley, J. H. McClelland, T. G. Comstock, O. S. Runnels, C. E. Fisher, W. E. Green, E. H. Porter, I. T. Talbot, Reuben Ludlam, François Cartier, R. E. Dudgeon, J. H. Clarke, J. Compton Burnett, W. A. Dewey, Charles Mohr, J. T. Kent, G. J. Jones, S. H. Talcott, H. F. Biggar, E. H. Kellogg, and

many others of the living : or, if the ethics of the profession forbid anything but the immortality of a postage-stamp (which consists in the printing of no pictures except of the dead) then we have a long list of the illustrious dead, beginning the roster of course with Hahnemann, followed by Boenninghausen, Hering, Dake, Lilienthal, Holcombe, Dowling, Norton, Thomas, Drysdale, and others who have gone before. Why does not some one of the publishing firms try this with the homeopathic profession?

In a recent lecture on delivery by forceps, Dr. Davis stated that the instrument which, at the present time, is giving the most general satisfaction, not only in his hands and the obstetric clinics in this country, but also abroad, is that known as the Simpson forceps. It is necessary that the instrument should be well made and long enough for high application. The efficiency of the forceps is greatly increased by the use of axis traction tapes. These may be passed through the fenestra, or, what is better, the blades may be perforated by two holes, through which the tapes should be passed. An axis traction bar, while convenient, is not essential.

From the *Boston Transcript*, of a recent date, we note that our friend Dr. I. T. Talbot has been elected by the trustees as a director of the Massachusetts Homeopathic Hospital, beginning January 1, 1898. We are informed that Dr. Talbot will relinquish general practice and devote himself to the supervision and direction of the various departments of the hospital. We are pleased to note that our distinguished colleague is once more in the harness, though not in the rough and tumble as heretofore. If there be any ease about his present position we know we voice the heartfelt wish of every man, woman, and child who knows him, in saying that he has earned it, and in hoping that he will live long and be happy.

The *News-Letter* of Boericke & Tafel gives notice of a new book by that noted and indefatigable homeopathic writer and historian, Dr. T. Lindsley Bradford, which is to be a history of "Old Hahnemann" College of Philadelphia. This book, it seems, was begun several years ago, and the historian, mentioned above, has made it very complete, including everything in connection with the college, names of the faculty from start to date, graduates, etc., with many illustrations. It is to be a book of from six hundred to seven hundred pages. We anticipate a treat of the first order of magnitude when this book comes to our table. "Old Hahnemann" of Philadelphia is the oldest homeopathic college in the world ; and the most famous of our American writers and teachers, as

well as the older practitioners, are members of its alumni. In later years, of course, other colleges have come into the field ; but notwithstanding this filling of the profession with other candidates for professional favor, "Old Hahnemann" has always stood at the head of the column, and for aught we can now see will not ever take second place.

The importance of voluntary muscular action in the treatment of defects of speech is emphasized in his teaching by Dr. Hudson Makuen. Whatever may be the defect, the immediate or direct cause may be traced to faulty muscular action. Remote causes, such as enlarged tonsils, adenoids, etc., should be sought for, and removed when practicable, in order to facilitate and make possible the right muscular action.

He divides the respiratory muscles into two sets : the one set having for its function the elevation of the ribs, thus enlarging the thoracic cavity ; and the other set the depression of the ribs, thus diminishing the thoracic cavity. The fullest development of these muscles is aimed at in the clinic, and remarkable skill in their voluntary control was shown to be possible by the exhibition of several cases.

We have received the Transactions of the American Homeopathic Ophthalmological, Otolological, and Laryngological Society, which society held its Tenth Annual Meeting at Buffalo last summer, just preceding the regular session of the American Institute of Homeopathy. The Transactions is a volume of 235 pages, is handsomely printed in clear type, upon heavy paper, and very evidently "seen" through the press by a skilled hand and a well-trained eye. The subject-matter is familiar to the readers of the specialty which the society represents. It has, with few exceptions, been put before the profession in journal form. It makes a handsome book for quick reference, as well as for a more leisurely study. Without inviting invidious comparisons, we think we may say with fair justness that among the many excellent papers contained in this volume the Address of President Norton, and the paper on Artificial Light by F. Parke Lewis, deserve to be considered as leading and star productions.

From a letter by our distinguished transatlantic friend, Dr. François Cartier of Paris, published in the *Revue Homœopathique*, concerning the progress made in the Hahnemann Tomb matter we learn that the present representative of the Hahnemann heirs is graciously pleased to give her consent to the proposed honoring of the bones of Hahnemann, provided always that the body of Mad. Hahnemann the second be not separated from that of her husband ! In our present view of Mad. Hahnemann the

second's conduct at the time, and for years following the death of her distinguished husband, and the shamefully neglected condition in which the illustrious Hahnemann's tomb is to-day, we are not disposed to give the second madam a moment's thought beyond that associated with intense indignation—unless it be to admire the gall of the present resident in Gaul, proprietress of the Tomb.

De Schweinitz recommends the application of sweet oil for burns of the eyelids.

Professor.—Never put ice on a patient suffering with a low type of fever; leave that for the undertaker.

The Eclectic Medical Gleaner of recent date, under the caption "Concentrated Foods," after speaking rationally for some paragraphs on the innutrition of condensed aliments, becomes so intoxicated with itself that it drags in a line of merriment about the "30th attenuations" of spider or bedbug or table salt being used as a concentrated food or condiment! There is good hard, downright, editorial thomasfoolishness for you! We are somewhat of a homeopath ourselves, and we have yet to hear of a homeopath recommending the 30th attenuation of any medicament known to our school as a concentrated food, or as a condiment! Brer Cleves had otter to try again. And yet, and yet, why use undignified language on Cleves when so many of our very elect, indeed of those sitting in the very porches of the Temple of Homeopathy, know no better? Much can be forgiven in the allopath and the sous-allopath—for they know not what they do; but to the pseudo-homeopath, who has had the opportunity to know better and did not or does not—no mercy should be shown. '*Raus mit Ihm!*'

Many a household is rendered unhappy by the absence of children. This is sometimes owing to the husband and sometimes to the wife, but in many cases it is almost impossible to determine the real cause of the trouble. An Edinburgh practitioner counsels not to forget the sedative affinity of belladonna toward the female sexual organs, and gives an opinion that the drug is followed by more or less benefit in every disease to which these parts are liable; and in married women who, though apparently enjoying the best of health, and never suffering from any irregularity of the sexual organs, are yet sterile, the exhibition of belladonna internally for some weeks is so frequently followed by pregnancy as to preclude considering the occurrence as a mere coincidence. Though advancing no theory in regard to the matter, he has noticed that during the exhibition of the drug the external genitals become more re-

laxed, and the os and cervix more pliable and softened.

Patient: Doctor, I am very short of breath. **Doctor:** Oh, well, we'll soon stop that.

Surgical Hints.—When an operation under chloroform has been finished, pour vinegar upon the mask until it is well saturated, and leave the mask in place. As the vinegar evaporates more should be added. This simple procedure has a marked effect in preventing or modifying the nausea after chloroform anæsthesia. It was first advised by a French surgeon, who says that it acts by the vinegar's forming a non-irritating combination with the chloroform vapor already changed in the lungs.

The presence of a refractive error or muscular anomaly may, not infrequently, be surmised from the facial expression. When the intra- and extra-ocular muscles are under constant tension to sustain clear and single vision, those under the control of the 7th nerve participate to a certain extent in the effort, as manifested by their unusual and unsymmetric contraction. It is from this source that frowns, wrinkles, and furrows in the skin, whose effect is apparently to increase the age of the individual, are developed and maintained. Thus, Dr. Hansell states that, in addition to the many other good results of wearing proper corrections and of tenotomies, they are of value in preserving the natural and unconstrained expression. In other words, the indelible marks of time are often to be avoided or delayed by attention to the ocular conditions.

Talking about service stripes to be worn on the sleeve by firemen, policemen, and letter carriers, one stripe for each five years of continuous service; why would not this be an excellent device for the medical profession to adopt? Or perhaps for the gynecologists and surgeon-specialists the bicycle idea would be better still, since they travel most on thus and so many hundred cases performed, without a death. Then some of our most "conservative" gynecologists would have to have an extra length put on the sleeves to accommodate the many century-stripes. Various colors might stand for various branches of service; one color to represent appendicitis, another hysterectomies—plain; another for laparotomies—complex; while, by skillfully combining several of the single colors, obstetric cases simple, and ditto complex, and other variations of the great Medical Art, which numbers its successes by the hundreds, could be arranged for. But if that fashion became pretty general the laity might catch the fever, as it has done in the matter of

legislating in New York, and insist that there shall also be other stripes worn for each stipulated number of deaths. So that perhaps the service stripe idea had best not be agitated.

When good milk is poured from a tumbler it will cling to the glass a little and not run off clean like water.

A case of infantile typhoid fever is reported due to the kiss of the father, who was dying of typhoid intestinal perforation.

Dr. C. G. Jennings says that from seventy to eighty per cent. of heart complications in early life are of rheumatic origin.

Dr. Casey A. Wood of Boston says that the wearing of veils is productive of weak eyesight, headaches, and sometimes vertigo and nausea.

A scientist has recently declared that somnambulism occurs in the lower animals. He says that nightmare frequently occurs among them. To be sure it does, for whence its name?

In five hundred examinations for the plasmodium malarie at Bellevue Hospital the organism was found in 102 cases. A large per cent. of these cases had developed within New York City.

A cloth wet with vinegar and placed over the nose and mouth for a few hours has a most wonderful effect in resuscitating the patient from the effect of an anæsthetic, as well as preventing nausea and vomiting.

Good Cause for Divorce.—At the last session of the Tennessee State Legislature, Representative Gillham introduced a bill making either the opium or cocaine habit sufficient grounds for securing a divorce. Unfortunately, the measure was defeated.

It would seem to the ordinary observer that there is a field wherein boards of health and sanitarians might do some beneficial work; at least more beneficial than hunting for pathogenic microbes in the sacramental cup, and destroying healthy dairy cows on the fallacious evidence of nonsensical tests.

Dr. D. D. Quillian of Athens, Ga., says that after abdominal operations the appearance of pus indicates that the doctor has contaminated his patient. He declares that a stitch-hole abscess is inexcusable. He says that a drainage tube is very rarely needed in abdominal operations if the work is properly done, and further that such operations can be done just as well in private houses as in hospitals, provided only that antiseptic measures are employed.

Why is it, asks the *Denver Journal of Homeopathy*, that in Denver only allopathic patients have appendicitis; that they are all operated upon, and that they all die?

The Chicago University has again been enriched by a new donation from its friend, Mr. Rockefeller. Which moved some doubtlessly envious person to say, that, judging from the amount of money needed to keep that Chicago University out of the sheriff's clutches, it must be a pretty dear kind of a white elephant on Mr. Rockefeller's hands.

When you have read Editor John H. Clarke's review of Hughes' Repertory of the *Cyclopædia of Drug Pathogenesis*, as published in the January number of the (London) *Homeopathic World*, you will know what he and some others of the English homeopaths think of that *Cyclopædia of Drug Pathogenesis*. Until a very recent period it has seemed to the most of the American homeopaths that there were no other practitioners in England but the Drug Pathogenesis kind.

The Carpenter Understood.—A carpenter sent to make some repairs in a private house entered the apartment of the lady of the house with his apprentice.

"Mary," the lady called to her servant, "see that my jewel case is locked at once."

The carpenter understood. He removed his watch and chain from his waistcoat with a significant air and gave them to his apprentice.

"John," he said, "take these back to the shop. It seems that the house isn't safe."

The Corwin Sanatorium, for the treatment medically and surgically of chronic diseases, located at Binghamton, N. Y., has now been open and doing business for over three years, but has made no attempt to catch the public eye by any advertisement beyond that legitimate form—the cure of its patients. It is pleasing to note the disposition of the managers to be conservative and cautious. They do not pose as great lights in surgery, but neither are they lacking in ability when the exigencies of the case demand the more heroic forms of handling. The death rate is truly astonishing in its unprecedented mildness, and bespeaks great care and ability, since in the more than three years of existence this sanatorium has had but two deaths, the one from tetanus, the other from shock.

WIT AND WISDOM (a new department) see page X.

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FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



FREDERICK L. SANTWAY, M. D.,
Theresa, N. Y.

"POISONS IN MEDICINES."

UNDER this heading a morning paper of recent date prints an editorial in which it deprecates the action of the Ohio Food Commissioner who is applying a certain "poison" law with an impartial hand, having now reached the patent medicines which have been flooding—almost literally flooding—the State of Ohio for years past, under handsome covers and gaudy labels. This law, in brief, requires that any medicine sold in this State, containing poison, must have a poison label—*i. e.*, a skull-and-cross-bones

label—upon the package. Now, it would seem to almost any right-thinking person that the due and rigorous administration of this law, having for its avowed and very evident object the good of all the people of the Ohio commonwealth, and one that can result in naught but good to all concerned, would be a most delightful opportunity for editorial writing of the impassioned and eloquent kind. Instead, however, of helping the Food Commissioner to protect the dear public from poison-taking, marvelous as it may seem, the Ohio press seems inclined to train its batteries upon the law and the visible exponent of that law, with the overwhelming probability that both the law and the official will be put to "sleep." Strange position to occupy for a public-protecting press. Is it not?

* *

THE paper from which we have quoted our head-line essays to make the point—and it is doubtlessly the best, if not the only point available under the circumstances—that this law, to be truly effective, should be applied to the physician's prescription as well as to the patent medicine, since the physician also prescribes opium, and belladonna, and aconite, and digitalis, and cocaine, and strychnine, and muriate of ammonia; and that, *argal*, there is just as much reason to apprehend evil effects and injuries to result from the use of an intelligent prescription for a present and tangible ailment, as from the indiscriminate guzzling of patented medicines. But this is an old argument, and one unworthy the editorial pen of a metropolitan daily. It is that one sometimes invoked by the saloon-element when they try to convince the public that if the saloons are to be closed on the Sabbath because that is a day of rest and all labor is to cease, then *all* forms of industry must also cease—milk wagons shall not be allowed to deliver milk, drug-stores shall be closed, street-cars and carriages shall be stopped; in short, the law is sought to be made ridiculous by a forced construction of its provisions. But these spurts of super-righteousness on the part of a trespassing class deceive no one. There is a spirit to the law as well as the letter. And for the

proper and reasonable construction of the law the Courts are in existence. But is not this a rather questionable position to assume so far as the medicine firms are concerned? May it not cause that great unwashed, patent-medicine-guzzling public to wake to the belief that the celery compounds and sarsaparillas, and nerve-tonics and cough syrups, and the thousand-and-one other miracle-working compounds, in reality contain some of these prohibited things, whereas they have been foisted on the credulous public as absolutely harmless and free from all injurious poisons?

* *

TO come back to our knitting. The position taken by the morning paper is not correct. The physician uses the poison, when he does use it, in that form and proportion called for by the presented physical evil: Knowing the nature of the poison, as well as the natural order of the disease to be combated, he fits the one to the other, removing the poison as soon as the desired result has been secured, and, then, promptly under well-known therapeutic laws follows with such other treatment as will arrest the further deleterious action of the poison, and thereafter carry the case on to a successful termination. That is to say, the trained physician uses the knife or the escharotic upon or within the diseased surface; but as soon as the heroic need is past he withdraws the heroic measure. In short, the prescription for poison, like the knife or the escharotic, has "brains" back of it—and a very possible malpractice suit; while the patent medicine has nothing back of it but that nauseating list of Saturday morning decrepit and debauched ex-notables who have been snatched from a proper death, and restored to a marvelous health and rubicundity by the timely use of a dozen bottles, more or less, of Mother Stinkman's Golden Balsam (harmless!), made, nobody knows from what, nor how, nor by whom, and taken with about the same degree of intelligence.

* *

IT is an awkward position for the daily press of Ohio to assume. It has really at heart, we believe, an affection for the dear people. It knows that this freight-paying people looks to the press for advice and knowledge. The newspaper quoted is not so stupid as the article by it presented would imply. It knows very well that the intelligence of a physician's prescription can never be debased to the level of a bottle of hit-or-miss patent medicine. There is but one thing which keeps the palladium of liberty from flying to the rescue of that same dear poison-threatened people, and that is the Mighty Dollar! Strange, isn't it? But that's just where the shoe pinches. "His praise I sing,

whose bread I eat!" How did this controversy arise? Why, simply, because one of these monopolistic medicine manufactories of the far East has ordered *The Newspaper Maker* (which controls the placing of all the patent-medicine advertisements in Ohio) to withdraw all its patented medicine advertisements from all the newspapers of Ohio, and as reason for this action gives the action of the Food Commissioner—who is requiring the poison label to be placed, as already stated! And *The Newspaper Maker* appeals to the newspapers for help. Will he get it? Sir?

* *

FANCY how decent and pleasant and interesting your Saturday morning paper would look and read, if, on opening it at breakfast, you failed to find that the Fourthcook of the President of the United States, or the Hon. Slumgullion Ragweed Smythe, ex-mayor of Poker-Flatte; or Clara Bawton-Rouge, Chief Nurse in the Nightingale Sanitarium, had each been cured of some fearful complication of hysterical flexure of the thoracic-duct by three and one-half bottles each of this or that hell broth (containing no poison), after skilled-physicians and expert-surgeons (who have made the study of the body and its failings a lifework) had given them up to die! Think what an hiatus it would be if, at the wheatcake stage of your Saturday breakfast, your eyes could not be gladdened by that quarter-page picture of His Reverence, John Saleratus-Biscuit Fourteenthly, Rector of The Slums Evangelical Society; or one of the Chief Fuglemen of some dead and gone Major of the U. S. Army; or of the grewsome picture of a ghastly skeleton practicing archery upon a robust-looking, twelve-button kid-glove, No. 24 corset-wearing, and over-ripe matronly-charms woman; or that one depicting some dejected young man with the usual stock countenance of the Errors of Youth variety, all and several whereof, the same, having been cured under the Providence of God by this or that "intelligent" Patent Medicine Corporation, who—this same Patent Medicine firm, composed of a number of dividend-expecting business men as is any corporation—bank, insurance company, pork-packing—who, still this medicine monopoly, without any professional skill, without any knowledge of the color, age, heredity, or previous condition of disease-servitude of any patient, is yet able to guarantee a perfect cure! Think how very nice it would be if it were possible to hand your favorite morning paper—that powerful engine of modern civilization—over to your young daughter, and not feel that she may find as one of the first things to read, a glaringly displayed notice of somebody's Pennyroyal Pills (with the usual caution); or a promise to send

for a postage stamp in a hermetically sealed, plain envelope a Treatise on Marriage, or a three-day cure (FREE) of Gonorrhea; or a descriptive article of How to Prevent the Pangs of Maternity. Think further, and finally, how that favorite journal would have to "hustle" to give you more of the news of the day in lieu of the present nauseous indecent quack and clap-trap advertisements of the No-Cure-No-Pay gentry and corporations,—including the Christian efforts of that band of stool-pigeons of Michigan—the pretended music-dealers, brick-sellers, celery-growers, and tobacco-merchants, who offer their principal's private prescription in a sealed envelope FREE for humanity's sake! Then stop thinking.

^{* *}
BUT this is all wildly chimerical. We know that. Still we have pleased ourself with the passing thought of how nice it would be if the newspapers of Ohio could rise from the trammels of their counting-rooms, and stand shoulder to shoulder with the Food Commissioner of Ohio in his crusade against this very present and pervading evil. But the Age of Miracles is past. And Horace Greeley and Charles A. Dana are dead!

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

MEDICAL MATERIAL.

Jambul IN DIABETES.—Dr. Reynold W. Wilcox² has been observing the effects of jambul in glycosuria. The drug is of ten years' use in this country, but of twelve centuries' use in India. We read that in 775 A. D. it was used to reduce the secretion of urine.

The theory as to the mode of action of the drug is based upon the most recent physiological discoveries, which show that in the alimentary tract the carbohydrates are so changed that little or no sugar gets into the portal vein. Any that does get into the general circulation is rapidly and completely eliminated by the kidneys. Weakening of the power of assimilation in the intestine occurs coincidentally with glycosuria. It has been found that the addition of jambul to a mixture of starch and diastasic matter, reduces very greatly the amount of starch converted.

Dr. Wilcox has secured remarkable results, giving the powdered seeds in doses of five to ten grains thrice daily. To get the drug pure the seeds should be procured and comminuted.

Quinine Nose-Bleed.—Dr. R. W. Hastings² treated a boy of seventeen who had become chilled and tried on his own responsibility that harmless (?) and popular drug, quinine.

"Thinking to throw off the approaching 'cold,' as he had often done before, he took six grains of sulphate of quinine. There was no apparent effect on the 'cold'; but three hours later, after blowing his nose, he began to have nose-bleed, and had six sharp attacks within three hours. Pressure under the upper lip checked the flow each time in two or three minutes. On account of this recurrence he called at my office.

"Examination showed a throat nearly normal; nose closed with dried mucus and blood; pulse full and hard, but not rapid; occasionally a beat not so full as the others; temperature 99.2° F.; skin rather dry; no tenderness of abdomen; no headache or other pain. He said he had had no ringing in the ears, headache, dizziness, or disturbances of vision. Sense of fullness in his head was the same as before taking the quinine."

Iris Versicolor IN ECZEMA.—Dr. H. M. Dearborn² says that this is a drug with distinctly neurotic properties, but so far as the skin is concerned, the effects produced are chiefly reflex or secondary in order. The pathogenesis indicates that its primary action is on the gastro-intestinal tract and pancreas, while secondary effects may be manifested by hepatic derangements, nervous depression, neuralgic headache (migraine), pustular eruptions of the face, scalp, etc.

The cutaneous lesions may rest on a red base, the inflammation may tend to spread deeply or broadly (in lines), to suppurate slowly, and rarely become fungoid about the edges. The favorite locations for eruptions are the face, scalp (vertex), hands, and wrists, but when the other symptoms of iris are distinct, the region involved is less important, and even the form of the lesion need not contra-indicate this remedy. Sensation of soreness, tenderness (to touch), itching, and tension are most common. These

are made worse by warmth, exercise, and pressure.

Pustular eczema of the scalp occurring in children, a similar form on the bearded portion of the face of adults, or at any age on the hands and wrists, giving a history of frequent gastrointestinal and bilious attacks or headaches, or accompanied by such indications for iris, may be speedily cured by this drug.

Chopcheenee *φ* IN SYPHILIS.³—This is a plant indigenous to India and other Eastern countries. Some Indian medical writers are of the opinion that this medicine was introduced into India by Chinese traders. However it be, this much is certain, that this medicine has been in use in India for a very long time, as we find evidenced by medical works written some three hundred years ago. The root is the only part used as medicine; it is said to be useful in rheumatism, epilepsy, insanity, and particularly in syphilis. It is a most renowned medicine for syphilis in India. Its action is more decided in the secondary stage, especially when the skin and mucous membrane are the seat of suffering. It is a non-poisonous plant, and so its action is mild and not so violent as that of mercury; still it is in no way inferior to the latter in its efficacy in syphilis when the disease has gone to the secondary stage.

Dr. Gangadin of India, says: "I have in my practice seen its wonderful action in hundreds of cases of secondary syphilis. (I don't think it has any action in its primary or tertiary stage.) I have prescribed it in the following conditions of secondary cases with great benefit. It has invariably proved itself not only a relieving but a radically curing remedy.

"1. Eruptions of every kind—exanthematous, papular, vesicular, tubercular, pustular, squamous, and ulcerative.

"2. Mucous trouble of the throat—irritation, inflammation, or ulceration.

"3. Syphilitic condylomata or other excrescences.

"4. Nocturnal pains in the muscles and bones, which are generally present during the secondary period.

"5. Syphilitic rheumatism.

"Administration.—The action of the medicine is generally known within one to three weeks;

it should be continued for a sufficiently long time, according to the severity of the symptoms and chronicity of the case. I have always used it in tincture form. Dose: 10 to 30 drops in an ounce of water three times a day."

CLINICAL CONFIRMATIONS.

Actæa IN INSOMNIA.—Dr. Geo. Burford⁷ removed a large ovarian cyst from a woman in the seventh month of pregnancy. For the first two days the convalescence was uneventful.

On and after the third day the mental condition of the patient underwent a noticeable change. Her conversation and replies were incoherent and disjointed; during the day a fatuous smile accompanied articulation, and her mental state seemed in general that of hebetude. There was also a persistent tendency to push down the bedclothes. At night the tout ensemble was that of irritability; she would repeatedly make efforts to get out of bed; and sleeplessness was pronounced. Belladonna was given at short intervals during the day, with gelsemium on the third night, aconite 3 on the fourth night, and a full dose of morphia on the fifth night. Of these remedies, the morphia only secured any sleep, and that merely for a short period of two hours.

Finally actæa (*racemosa*?) ix was prescribed, given four times daily.

The result was almost dramatic: the first night ensuing the patient had four hours of continuous sleep, the next night six or seven hours, and thereafter the insomnia vanished. Contemporaneous with the improved capacity for sleep came general betterment in the mental condition, and, four or five days after the first administration of actæa, the convalescence became and continued smooth and easy, the mental symptoms vanishing.

At term, by an easy and uncomplicated labor, a well-developed healthy child was born, and the puerperium was without impediment.

Bufo Rana IN EPILEPSY.—Dr. W. A. Dewey¹⁴ says that epilepsy arising from fright, self-abuse, or sexual excesses will often find its remedy in bufo rana. The aura preceding the attacks starts from the genital organs; even during coitus the patient may be seized with violent convulsions. In another form for which

bufo is suitable the aura starts from the solar plexus. Previous to the attacks the patient is very irritable, often talks incoherently, and is easily angered. It is in the sexual form, that brought on by masturbation, that bufo is especially useful. It has also proved useful in severe cases in children where the head is drawn backward in the convulsion.

Kali Nitricum IN DIARRHEA FROM VEAL.—Dr. E. V. Rose⁹ reports the following interesting verification :

November 20, 1896, at 7 A. M., I was requested to visit Mrs. G., æt. sixty, and found her suffering from an attack of diarrhea which had been going on for past three days. She informed me that it was brought on from eating a small piece of veal three days previously. She had had one previous attack, caused as she believed from partaking of veal; this attack lasted some six weeks and brought her to a very low state, and she was fearful that this attack would be even more severe, as it had so far presented a more violent character. With pencil in hand I jotted down the following: Stools frequent and profuse, as many as twenty in twenty-four hours. Stools watery, dark brown in color. Before stool rumbling and griping in the umbilical region. After stool great prostration. Concomitants: Loss of appetite, thirst, tongue clean, nausea, constant but more severe at times; feel weak. Modalities: Aggravation from eating veal. Bell's Therapeutics of Diarrhea, etc., gives but one remedy as having the peculiar aggravation from eating veal, viz.: kali nitr. Boenninghausen's Therapeutic Pocket-book gives the following: ars., calc. c., caust., chin., ip., k. nit., nux v., sep., sul., verat. a., zinc.

My first thought was to give ipecac., but after considering the symptoms of kali nitricum as given in Dr. Bell's work I decided on the latter, giving two powders of kali nitr. 3m. (Jenichen), one hour apart, and plenty of placebo to follow. Diet: "Scalded" milk.

November 21, 10 A. M.—Great improvement, stools gradually grew less than during previous day. No stools during the night, sleeps quite soundly, feels quite well this A. M., but weak, appetite better, one quick natural movement this A. M.; she continued to improve and has upon

three occasions since the last attack partaken of veal without any ill effects.

"Some persons always have diarrhea after eating veal. The curability of such cases with kali nitr. needs somewhat more confirmation, but no other remedy has had this symptom so well confirmed as yet."—Dr. Bell.

CLINICAL AND THERAPEUTIC NOTES OF RECENT CASES.*

REPORTED BY DR. MIDGLEY CASH, TORQUAY.

Two Stannum Cases.

I. Mrs. A., æt. forty-eight, wife of a clergyman, ordered abroad by Dr. D. P., who told her she was threatened with tuberculosis, and that the right lung was affected, tubercle bacilli having been found in the sputum. Severe night cough, spitting up much blood-streaked mucus, constant sweating and considerable loss of weight had appeared lately.

Being an old patient of mine, her husband wrote me in much alarm about his wife, and asking for remedies. I sent her stannum 3x, 3 grains to be taken every three hours during the day and 3 drops of hyoscyamus at bedtime, to be repeated every two hours through the night if awake and coughing.

In ten days he wrote that the medicines had certainly done his wife good, and it was remarkable to him "how much more good the homeopathic treatment does than the best allopathic."

The cough entirely ceased, she slept well, gained weight, and in six or eight months became comparatively strong and healthy.

II. Mrs. B., æt. forty. A tall, emaciated, worn-out woman, the wife of a laborer. Has been in ill health and anæmic for some years. Got a chill a week before she was seen and developed a pneumonic patch at the apex of the left lung. She was expectorating copiously a frothy blood-streaked mucus, the temperature being about a degree above normal.

Ant. tart., bryon., phosph., silic., and china were given in the five months that followed, with perhaps some amelioration of symptoms. At the end of this time I found her general condition lower. Examination revealed a cavity in the left lung, with tinkling and amphoric breath-

* *Monthly Homeopathic Review.*

ing. Expectoration profuse, stringy, and fetid. Terebinte inhalations improved the last-named symptom. A course of stannum was now prescribed—2 or 3 grains of the 3x trituration being given three times a day. This was persevered in for five weeks. At the end of this time examination of the chest showed improvement. The cavity in the lung seemed drying up—only a slight tinkle heard, and amphoric resonance fainter. The expectoration and cough were much reduced. She now feels stronger, and is able to do some of her household work. In short the disease, which was making rapid progress, was arrested for the time. The patient lived for over two years afterward; the stannum a second time during that period averting a further attack, which threatened to be speedily fatal.

NOTES OF CASES TREATED BY DR. MACKECHNIE
AT THE BATH HOMEOPATHIC DISPENSARY.

Eczema.—Croton Tig.

Emma W., æt. thirty. Has eczematous patches at bends of elbows, which crack and weep, causing much irritation. The itching is worse at night and after food and after washing. Bowels costive, with large difficult stools. Otherwise healthy, urine and menses as usual. During the first two weeks she received rhus, cantharis, and bryonia. The latter relieved the constipation, but the eruption continued to spread and appeared on the face, the irritation being constant. Croton tig. 6x was now ordered. The itching remained the same and even increased the first week this was given, but the patches began at once to decrease in size, especially on the face. The following week the irritation had almost ceased, the face was clear, and but little remained elsewhere. Croton was continued, and the case shortly reported cured.

Pemphigus.—Rhus Tox.

George G., æt. six years. Has a bullous eruption on scalp, face, neck, wrists, and other parts. This has existed for some time and is still coming out, the older bullæ having dried up and leaving black crusts. Child well nourished and otherwise healthy. Considerable irritation and heat about spots. Ordered rhus tox. 3x. The irritation subsided during the first week. No fresh places occurred, except in the

scalp, where there was a fresh outburst; in other parts eruption was rapidly fading. To continue rhus. In six weeks the lad was cured, the scalp being the last part to recover.

"Uricacidaemia."—Glonoin, Lycopodium.

Louisa S., æt. twenty-three years, housewife. For some time had suffered from headaches at nape of neck, aggravated on stooping. The pain is throbbing and accompanied by flushings and heats. Bowels confined; she has blind piles. Urine now copious and free, but sometimes thick with pink deposit. She feels heavy and listless, and often has indigestion; catamenia irregular; is worse at periods. Ordered glonoin 6x. In four days the headache was better and bowels relieved, and in a week pains had ceased. She was generally improved, but now complained of fullness and distress after food, with abdominal flatulence and deposit of pink urate in urine. Lycopodium 6x was now given. This relieved all the symptoms described. Patient now acquired a specific metritis and discharge, for which she remained under treatment for three months, but there was no return of previous symptoms of uricacidaemia.

Chronic Dyspepsia.—Pulsatilla.

Alice B., æt. twenty-two years, domestic servant. Complains of dyspeptic pains and tenderness at epigastrium after food, of six years' duration. There are no other symptoms obtainable; bowels regular, urine and menses normal. Ordered pulsatilla 3x. In a fortnight she reported "much better." To continue pulsatilla. Patient did not return for eleven months, when she sought relief for other symptoms, having had no indigestion meanwhile.

Choreic Spasm.—Cuprum.

Mary Y., æt. forty-eight years, a shirtmaker. For some time has noticed spasmodic jerks of her neck, which twist the head round. They are now very frequent, chiefly affecting sternomastoid muscles. Catamenia ceased for six years, but she still suffers from flushes recurring at irregular intervals. Her bowels usually discharge three or four loose stools per diem without griping. Ordered cuprum met. 3x trit. In a week there was no improvement, except that the bowels moved once daily and stools were formed. As she complained much of frontal

headache, worse by stooping, with increased flushings, a dose of lachesis night and morning was ordered, to continue cuprum t. d. s. In a fortnight there was marked improvement. Jerking of neck much less, headache better, and flushes almost ceased. She now complained much of distention and flatulence after food. To continue cuprum, with an occasional dose of carbo. veg. for the flatulence. The cuprum was continued for some time longer, and in another month the patient was reported cured.

Lichen.—Arsen. iod.

Ada G., æt. eleven years. An eruption of papules commenced a month ago, and now covers body. Much itching at night. Appetite good, bowels regular. Treated for ten weeks by sulph., apis, and graphites, there was no marked improvement, the rash coming in fresh places while fading in others. It also changed in character under graphites, becoming squamous, each papule widening out to a scaly patch. A fluent catarrh also set in, and the itching at night continued. Arsen. iod. was now ordered. In three weeks the irritation ceased, and the rash appeared better. Ars. iod. was continued. Shortly after the eruption vanished, and the cure has remained complete.

Urticaria.—Urtica Urens.

Harriett H., æt. twenty-two years, a dressmaker. For some days has had an eruption of urticaria on arms, chest, and shoulders. Severe irritation, especially in bed, though it subsides after a time, and she then sleeps soundly. Appetite good, no indigestion; bowels rather confined; menses normal. Ordered urtica urens 3x. The rash subsided in a day or two, and there was no return.

Cephalagia.—Pulsatilla.

Alice D., æt. nineteen, dressmaker. Complains of transient pains, shooting through head, frequently recurring. They are aggravated by movement, not by stooping, and occur more often during morning. She has a catarrhal herpes at the angle of the lips. Appetite poor, cannot eat a hearty meal, constant uneasiness in bowels, which move moderately. Her sleep is disturbed by dreams, she has dyspnoea on ascending stairs. Ordered pulsatilla 3x. In four days she sent for more medicine,

being much better. Shortly after she reported herself cured.

INTERCOLLEGIATE MEMBERSHIP.

OUR esteemed contemporary, the *American Medical Monthly*, vormal *The Southern Journal of Homeopathy*, in answering some criticisms of THE AMERICAN HOMEOPATHIST on the conduct of the Intercollegiate Committee of the American Institute of Homeopathy, reminds the reading profession that the Intercollegiate Committee of the Institute is composed of two members from each of the homeopathic colleges of the United States, and mentions the names of several of these eminent men. The very evident desire of the *American Medical Monthly* being to show that with these honorable men in fellowship in that Intercollegiate Committee neither that committee nor any of its sub-committees can do a wrong. But isn't that an oldish kind of an argument, that because eleven of the apostles were good and faithful there could be no twelfth who betrayed his Master? It would have been more to the point if the *American Medical Monthly* had quietly admitted that that sub-committee, which attempted to define the meaning of the word Homeopathy, and give the exact number of professors of any applicant college who must be in membership with the Institute, and also how many of them might safely dabble in current fads—it would have been an easier escape from an awkward dilemma, if that journal had admitted that the sub-committee had exceeded its authority, and that at the next annual session of the *whole* Institute at Omaha, the subject would be reconsidered and properly adjudicated. This would reflect no dishonor or disgrace upon the many honorable members of the whole Intercollegiate Committee, since anyone who knows anything of standing and almost perfunctory committees, knows that attendance is not apt to be very plentiful, and attention to wearisome details not often given. As we understand the situation that sub-committee report was almost informal; it was the creation of two of the members of that sub-committee; and it was not brought in until toward the close of the Institute's session. But in this we may be wrong. Whether we are or not, the fact is that a report *was* brought in which was unfair and

querle, and unbecomingly so large and noble-hearted an institution as the American Institute of Homeopathy? Further, that at Omaha the Institute will not long permit this childish report to remain unchallenged.

INSTITUTE CRITICISMS.

THE *Denver Critique* presents in its December issue a second paper by Dr. D. A. Strickler, answering one by Dr. E. H. Porter, editor of the *North American Journal of Homeopathy*, and as well the efficient General Secretary of the American Institute of Homeopathy. This answer, like the paper which called it forth, deals with figures and statistics; the one, Dr. Porter, essaying to prove that the attendance and giving of chairmanships, and the prevalence of the Senior-habit among recent Presidents, is not, as alleged by the latter, Dr. Strickler, in his first paper. Dr. Strickler returns to the charge and, we believe, makes a good case. But whether he does or does not, that with which the profession is most concerned is this: Why is there so much dissatisfaction among the homeopathic profession with the conduct of Institute affairs? There must be some good reason for this muttering even if it be not outright or downright complaint. The complaint, however, seems to be founded in fact, since we have such large and influential members of the Institute as Porter and Dudley taking part in the defense. Just now we are saying nothing as to the right and wrong of the case. We were the first to call attention to this subject, in advance of the Buffalo meeting and for the purpose of having that meeting take action looking to the remedying of the troubles. And it made a noble effort to do so, as a whole, though some of the parts, notably one or two committees, were not over-happy in bringing peace to the troubled waters. That some change will soon have to be made in the policies of the Institute is becoming more and more apparent with each recurring session. The *Medical Counselor* has now entered the field with some very practical suggestions for the Institute's consideration. We look with much hope to Omaha, for we know the West will be there in a body, and if President Wright does the right thing, and there is every inherent probability that he

will, then the tide of dissatisfaction will be stemmed and the Institute restored to the confidence of the general profession as the prime favorite.

ALL HAIL, PRESIDENT GUTHERZ!

IT is with no little satisfaction that we note the election to the highest office in the gift of the Southern Homeopathic Medical Association—the Presidency—of our charming friend, Dr. Lizzie Gray Gutherz of St. Louis. Those who know this estimable lady—and her friends are many, scattered far and wide over the United States—rejoice with us in this deserved compliment to a worthy and hard-working homeopath. Dr. Gutherz has been the General Secretary of the Association and is therefore well qualified to conduct the greater affairs of the Association. It is the first instance in the history of that organization where a woman-physician was inducted into the chief office. We are confident that the choice is an excellent one, and that the present year will find President Gutherz as enthusiastic for the greater success of the Association as at all times heretofore. And if we do not mistake our surmise there will be some rattling of dry bones, with the result that the stay-at-homes of the recent past will find it to their interest to attend the next meeting. The Association placed another excellent woman physician in the secretary's chair, Dr. Frances MacMillan—whom we also know personally and can vouch for as to efficiency and faithfulness. The Southern Homeopathic Association is to be congratulated on this wise departure. May we have a copying of this example in the American Institute of Homeopathy?

MOVE ON, JO

LATE advices from the land of Gold—not the Klondyke—shadow forth an attempt to restrict the coming to its health resorts of consumptives. Singular, isn't it, that the people of California, who have become what they are though the lavish settling in their State of the peoples from other States, because of the aforetime, and even yet, grandiloquent invitation for health-seekers to visit and stay in California—this glorious climate of California—are now

anxious to have these peoples Move On ! It reminds us of that ridiculous attempt of certain now popular public men trying to cast their shadows—meaning by that, being ashamed of the steps by which they had laboriously risen to present eminence. We know, and so do our readers, of two literary celebrities in present public life—not doctors—whose fame came to them suddenly by the publication, in each case, of a quaint poem, which instantly caught the reading public and was printed and reprinted all over the United States until the two authors were become famous. On the strength of these efforts, which they now believe to have been crude and unclassical, they became attachés of many current magazines and their literary output was sought for and gladly read ; so they rose from step to step until in the fullness of time they entered the political arena, both being to-day in the consular service. And because of their present surroundings they are ashamed of their first poem and try to discourage its reprinting, etc. They are exceedingly bored on public functions when they are introduced or referred to as the celebrated author of *that* poem ! Here comes California, having risen to Statehood by the means of emigration from the “States,” on its held out promises of health to the emigrant, and is now ready to put up a barb wire, having first driven out from its borders the poor consumptive who has expended what little of means he had left from treatment in the East in getting to California. Poor consumptive ! Move on, move on ! You are not wanted anywhere. Better charter one of the Sandwich Islands and importune some Father Damien to come over and minister to your few wants while you live out the few years that may yet be allotted to you.

HYPEREMESIS GRAVIDARUM.

IT is a satisfaction to the medical profession to know that Smith, Kline & French Co., Philadelphia, have at last placed in their hands a very effective means of overcoming this very stubborn and often serious symptom of the period of gestation. We refer to the reported experience of Dr. A. J. Sauer of Baltimore, who says: “Eskay’s Food has proven serviceable to me in two cases of vomiting of pregnancy, being the

only retained article where both food and medicine were ejected.”

THE HAHNEMANN TOMB.

IN a letter contributed to the *Revue Homéopathique Française* by its editor, Dr. François Cartier of Paris, we learn that the work of the International Homeopathic Committee is fairly under way and making progress. Dr. Cartier reports that he had occasion recently to meet the present owner of the Hahnemann tomb,* the Baroness of Boenninghausen, on her visit to Paris, and found that lady very much affected by the honor which the homeopathic world was preparing to render to the mortal remains of its forefather. She was very gracious to the committee, but was especially solicitous that the body of Hahnemann’s wife be not separated from that of her husband. Proper legislative acts are now being considered by the committee so that at no future time may there be any complication concerning the tomb or the body of Hahnemann. As in other countries, Dr. Cartier writes, this legislation goes on with “administrative slowness,” but he hopes that it will be completed within a month or less. The *Revue* presents the following list of subscriptions paid :

Dr. I. Tisdale Talbot of Boston	20 fr.
Dr. J. H. Clarke of London.....	125 fr.
Rev. Kourouschinsky of Odessa, Russia.....	7 fr.
Dr. Léon Simon of Paris.....	100 fr.
Dr. Chanceler, Sr., Paris.....	100 fr.
Dr. Marc Jousset of Paris.....	50 fr.
The French Society for the Advance- ment of Homeopathy.....	500 fr.
Dr. Jousset, Sr., of Paris.....	100 fr.

Total..... 1,002 fr.

Nothing has yet been decided as to the best manner of enlisting the sympathies of the world’s homeopathic societies. A letter will probably be sent to each such society inviting co-operation, etc. It is believed that each country will be asked to make its own appointments and perfect its own arrangements for subscribing and collecting moneys for this purpose. One excellent point, and one which might be well considered and copied by some of our

* Does not “Old Hahnemann” of Philadelphia own this tomb by purchase ?—EDITOR.

American societies, is that of not publishing the names of anyone but those who have PAID! In other words, no subscription will be published which is not also paid in to the committee. Subscriptions are solicited and will be promptly acknowledged and published.

HELLO, MINNESOTA, ET AL.!

FOR "President of the University" in the following clipping (taken from *Harper's Bazar*) read "A Regent of an American F.R.E. State requiring an Admirable Crichton Medical Examination."

There were great rings under the eyes of the president of the university. His cheek was pallid and his lips were dry and cracked. His expression was haggard, and every now and then his whole body twitched nervously as he turned and glanced furtively back of him.

"You look ill," said his wife. "Is anything wrong, dear?"

"No," replied the president of the university. "Nothing much, my dear. But—I—I had a fearful dream last night, and I feel this morning as if I—as if I——" Here his mind wandered off. It was evident his nervous system was shattered.

"What was the dream?" asked his wife soothingly.

"I—I dreamt the trustees required that I should—that I should pass the freshman examination for admission," sighed the president.

CHICAGO COLLEGE ITEMS.

—The Graduating Class of the Chicago Homeopathic College numbers 33.

—All the surgical clinics at the Homeopathic Colleges are very rich in material at present, and that too of an instructive and practical character. The clinics of Professors G. F. Shears and H. R. Chislett of Hahnemann Medical and of Professors Chas. Adams and E. H. Pratt of the Chicago Medical are especially entertaining.

—Professor Ludlam is as interesting as ever, and in his instructive clinical talks on Wednesday mornings he often "cracks a joke," and, but for the ban of "Quaker Morning," the "house would come down."

—Hering Medical now occupies a new college building, which, though not very large, answers the purpose of the college. The faculty has been increased, and, although in some respects not improved, it probably meets the requirements for the present, at any rate. The clinical facilities have been much improved.

—Hahnemann Medical has a large freshman class this year, 55; among them are 16 ladies.

—The smiling face of Professor J. R. Kippax is an inspiration for the "medics" of the Chicago Medical. It boosts the boys over many obstacles.

—"The Materia Medica Clinic" is a new clinic which has been added to the course in Hahnemann. Professor G. H. Clark has charge.

—Dunham Medical College is having quite a little trouble, according to reports. Shake-ups, "internally and externally."

—The freshmen of the colleges are congratulating each other (over the cadaver) in that at least a portion of the work in dissecting has been finished. The Illinois State Board of Health now requires, of each medical student, the dissection of an entire cadaver. This work required some time and the necessity (in order to save material) of working at from two to four different bodies during the course.

THE WINCHESTER-QUART BRIGADE.

IF we are credibly informed, the prophecy of the Hahnemann spook No. 1, as quoted from the (London) *Homeopathic World* in these pages a little while back, has already come true! In response to that interesting circular inviting members of the British Homeopathic Society to take certain doses and thereafter fill sundry Winchester quarts with their urine, with the laudable object of thereby placing the treatment of diabetes on a scientific basis, there was, we are told, a rush of—one prover and a half—the better half. The Materia Medica Committee, fearing that the urinary organs of this contingent might prove unequal to sustaining the requirements of the scientific dignity of this august society, declined the offer with thanks; and thus the prophecy of the Sam. Hahnemann spook No. 1 was fulfilled—in a barren result. The treatment of diabetes, in spite of the B. H. S., still remains deplorably "unscientific." It would almost seem that the B. H. S. is so august that no therapeutic effort of which it is capable could by any possibility be worthy of its augustness. Perhaps this may explain why it has done nothing as yet "to advance the world's knowledge of drugs." At any rate, as we understand, this is the plea on which the Winchester-Quart Brigade has been withdrawn from the field, before the action commenced. Now let the B. H. S. come back to the homeopathic treatment of the diseased condition ordinarily called diabetes, and see if it will not gain knowledge worth recording. And, finally, it is rapidly ceasing to be the mode to belittle Hahnemann and his works. Better stop some of this "scientific" nonsense and try Hahnemann's homeopathy again.

LATEST FROM THE STYX.

SAYS the Real Sam. Hahnemann, in a letter received from him the other day by the (London) *Homeopathic World*:

"And why should I sneer at the employment of all the modern methods invented since my time for determining with greater accuracy the precise character of the symptoms? Had ureometers, saccharometers, and 'Winchester quarts' been known to medical observers in my time, is it likely that I should have despised them as innovations?—I, the greatest medical and chemical innovator of my own or any other period! . . . do you think it likely that I could have been contented with the very superficial examination of the urine there laid down, which was the only one possible in those pre-scientific days, if I had known of ureometers, saccharometers, and the like aids to precision? I, the strenuous advocate for every means for obtaining 'precise information respecting each particular detail' of every morbid symptom, to object to any means for ascertaining the details with greater precision, and thereby differentiating the effects of drugs! The insinuation is a calumny."

Certainly! If Hahnemann were alive and practicing medicine to-day, and had heard of the prevalence of that army fever in some of the southern states of Europe, or of the cholera elsewhere, or of the yellow fever in America, instead of asking for a record of the symptoms upon which to work out the genus epidemicus, and so help decrease the mortality, he would have asked that the newest half-baked medical graduate isolate and send to him a culture made from the sputum, or the urine, or the fæces, or the blood, or of any other old thing about the patient;—and upon this he would have recommended injections of rotten-horse-ine from anti-toxine to erysipelas!

If he had been importuned by Boenninghausen for a remedy for the latter's child, lying sick of a fever, he would have recommended an hypodermatic of one-eighth grain of morphine to allay present pain, and in addition to apply a stick-em tight's Bell-cap-sic plaster over the solar plexus, and give in alternation, every hour, one No. 17 and one No. 6 combination homeopathic tablet, kept in stock in all Department Stores!

If he had been called to Her Auspicious Grace the Duchess of Fadden, and had found her doubled over with intense abdominal pain following upon the eating of a handful of raw-chestnuts or a lobster-salad earlier in the evening, and that these attacks had a fashion of being aggravated at the menstrual molimen, he would have looked unutterably wise, put his hands deeply into his (own) pockets, walked around the bed twice and a half times, charged the family \$14.99 for his visit, and counseled the removal of the Duchess to his favorite

private hospital, there to undergo a speedy and radical operation, in the early candle-light, for an ovarian cyst. Price \$217.49.

If he were called to the Hotel Castoria, New York, and had found that prominent anti-Tammany politician, Major Sopperment, suffering from a previous night's high-lonesome, with radiating pains in the right hypochondria, leading toward the umbilicus; with temp. 104.7°, pulse tracing and registering a curve like the gyrations of a drunken step-ladder, respirations 47.9, urine acid, spec. gravity 1095, etc., etc., he would have ordered a \$25 a week trained nurse, a \$30 a week room at his private sanitarium, and an operation for appendicitis. Price, \$199.99.

Certainly, Hahnemann was no fool. He was a progressive man, a student who had been taught to think, a scholar, and a martyr. He was up to date and, indeed, beyond and ahead of his date. He would have used the very latest specula and technique and orificial delvings and stretchings and silk-worm gut. He would have had the very best ureometers, microscopes, saccharometers, and "Winchester quarts." He would have been one of the very first to turn state's evidence as to the pretended value of his "imperfect," filled-with-chaff materia medica. He would have been occupant of the chief place in the synagogue of Bugteriology. He would have had his name in the morning papers for a week or two at a time annexed to bulletins of health concerning this or that wonderful case, to which, in his great brotherly love, he would have called several allopaths in consultation. He would have had made noisy reprints and sent them broadcast of his third thousand cœliotomies without a death. He would have been Professor, with a capital P, in the Progressive Hermaphroditic Medical College and taught, in unison with the seventeen or twenty-one other mechanical chairs (and one woman), the surpassing value of mechanics in the treatment of all the ills to which poor humanity is heir. He would have been a member of the Baltimore Expurgatorius Club, and "hot" to throw out all those "trivial" mind symptoms with which a hundred and even sixty years ago he had done such effective work. He would have been a toe-kissing, genu-pectoral idolator at the shrine of the *Cyclopedia of Drug Perversions*—nothing admitted above the 12th nor below the tincture! He might even have been tempted to formulate the Bunsby summings-up of that Materia Medica Conference. And, finally, last but not least, he might have been deemed sufficiently unHahnemanniatic to be dubbed and created in due and ancient form a Corresponding Member of the British Homeopathic Society (limited)!

But alas! and alas! and yet more alas! Hahnemann is dead, and is not able to defend himself and his works against the many modern medical mountebanks, who endeavor to discredit his work and his sanity, who are trying to convince themselves that they may throw overboard all that Hahnemann discovered and promulgated, *except* the Law of Similars (which was discovered by Esculapius, and was well known ages upon ages before Hahnemann)—and still be homeopaths!

Certainly, Hahnemann, the Thinker and Martyr, had he lived in this Golden Age would not have invited poverty, black-bread, contumely and repeated exile for himself, his not-Parisian wife and children. He would have been just like the rest of us science-crazed, fad-bitten, germ-hunting, squirt-gun-therapy Homeopaths! Oh, certainly!

GYNECOLOGISTS AND PUS TUBES.

IT is very widely maintained among gynecologists that tubal abscesses are in a large measure traceable to the existence of previous gonorrhea on the part of the husband. It is not uncommon for surgeons to contend that this condition is to be traced back to gonorrheas that have passed away years before marriage. They insist that the gonococcus has been hiding away all that time in some quiet receptacle, only to come out, and, in the light of the honeymoon, invade the uterus and tubes of the unsuspecting bride.

If this contention be true, prostitutes who ply their trade more than two or three years ought not to possess healthy ovaries, for it is the rarest thing for them to escape having in that time two or more attacks of gonorrhea. Yet, as far as our impressions from our reading and personal observations go, they are strong that the number of operations on account of salpingitis among prostitutes is disproportionately small; and this notwithstanding the fact that the temptation is great for those who would gain experience to operate on this class of patients. It would be interesting to know what proportion of cases of pus tubes are found respectively in chaste women and in prostitutes.

HUMBAG ANTISEPTICS.

IT may be said that one of the most potent causes of the late growth of private hospitals and sanitariums for surgical cases has been the humbug theory of antiseptics.

We noticed lately a trenchant essay on this subject from no less an authority than Frederic Treves, who exposes the thin-veiled quackery of certain operators, and shows that the greater part of modern surgical operations in our thea-

ters are performed for dramatic effects; that the antiseptic hobby is being ridden to death, and that any operation may be performed with as good or better chances in one's own home as in any hospital.

Let physicians rid themselves of the nightmare of germ infection and utilize the simple principles of common cleanliness in surgical operations. Let them insist on these operations being done under the shelter of their own homes, amid the cheer and solace of their kindred or friends.—*Times and Register*.

IMPROMPTU: ON READING "THE QUESTION OF SUICIDE."*

Natum quod tetigit non ornat it!
"He touched nothing that he did not adorn."

When "Charlie" writes on *Suicide*,
Instead of admiration,
One says, "Pray, lay your pen aside,
And give a demonstration."

Some things in life are "there to stay,"
Some may be stopped instanter;
Now, "Charlie," prove *Similia*
Similibus curantur!

S. A. J.

ANN ARBOR, November 15.

Correspondence.

Editor AMERICAN HOMEOPATHIST:

My December number of THE AMERICAN HOMEOPATHIST received to-day, and in it I notice an article headed "Fucus Vesiculosus," in which Dr. Knapp believes he has discovered a specific for goiter:

While attending a course in the Chicago Homeopathic Medical College, Chicago, some four years ago, Dr. R. N. Foster, who is professor of obstetrics in that college, gave me a R for goiter, which I have looked up and now have before me, which reads as follows: Goiter—Fucus vesiculosus—Fl. ex.—Half teaspoonful or a teaspoonful twice daily in water, will cure goiter in young people—not good in old people—and takes about sixteen to eighteen months to make a cure. He told me at the time he had cured about thirty cases, and had failed only in one, and that he had used it for years; he also added it was necessary to use a fresh preparation of it.

JAS. J. ROSE.

MARSHALL, Ill.

Editor AMERICAN HOMEOPATHIST:

DEAR SIR: I am another homeopath serving as one of Uncle Sam's pension examiners. Was

**North American Journal of Homeopathy*, p. 715, November, 1897.

appointed in 1889 by President Harrison, and have served continuously since without change of politics on my part. Respectfully,

I. M. MARTIN, M. D.

LA HARPE, ILL.

THE AMERICAN HOMEOPATHIST:

GENTLEMEN: In your article on "Dr. Price's Resolutions" (January 1, p. 10), you state that under certain named conditions a physician cannot practice in New York, Pennsylvania, or Minnesota, but may do so in Chicago and other cities.

I have been connected with medicine for over twenty-two years, practiced for ten years in Pennsylvania, a graduate of two first-class colleges (medical and pharmaceutical).

A few months ago I was refused registration in Illinois because I could not show "a high-school diploma, teacher's certificate, or other evidence of preliminary education."

Therefore, a physician who cannot show to Secretary Egan that he once knew the "exact altitude of the Himalaya Mountains" can not legally practice medicine in this city or State.

W. J. T.

CHICAGO, ILL., Jan. 12, 1898.

STREET-CAR DOCTORS.

Several physicians of New York are said to have given up practice and accepted positions as motor-men and conductors.

We clip this from the *Medical Argus* (Minneapolis). Can these things be? In a State where all competition from without is barred as effectually as if encircled by the traditional Chinese wall, are we to understand that there are doctors who cannot make a living? Why, this is remarkable! After acquiring all the requirements of the New York State Examination Board from Latin to Bacteriology (some medicine inclusive), then to descend to street-car railroading for a livelihood is very remarkable. Would this seem to imply that some other qualities are needful in a man to be a successful physician besides a glib-recitativo knowledge of text-books and formulæ? If the present examination law continues twenty years the New York people (laity) will have to send out of the State for physicians of renown like T. F. Allen, Helmuth, and many others of the present-day luminaries of New York, who were not New Yorkers to start with, and who could not to-day have passed, the one from St. Louis, the other from a down east State, into the charmed circle of the Empire State. Where

there is no competition there is no trade. The present eminent medical men in New York State will one by one pass over to the great majority; and their places can never be taken by the newer, the civil service crop who are now the only ones who can slip through the meshes of the wonderful examination law. But the vigorous man and doctor, who has battled with adversity in every form until he had conquered for himself a place of eminence in the profession, must stay out of New York, because in his early life struggle for bread and fame he failed to con all the pedagogical fads which theoretical doctors are now foisting upon the newer generation in the belief that this insures better doctors. And so we find well-educated physicians taking to street-railroading for a living!

Book Reviews.

THE PRESCRIBER: A DICTIONARY OF THE NEW THERAPEUTICS. By JOHN H. CLARKE, M. D., F. R. G. S., Ext. Mem. Royal Medical Society, Edin.; Fellow British Homeopathic Society; Consulting Physician to the London Homeopathic Hospital, and Lecturer on Materia Medica to the L. H. H. Medical School. Author of a number of well-known homeopathic works, and Editor of the *London Homeopathic World*. American Edition Revised and Enlarged by the Author from the Fourth English Edition. Philadelphia: Boericke & Tafel, 1898. In cloth, \$1.00.

This book in the form of a dictionary cannot but be of splendid service to any inquiring practitioner who may be in doubt; it seems also to be designed for the layman and laywoman. This latter feature—the preparation of homeopathic books for the lay practitioner and reader—is quite the thing in England, and because thereof the English homeopathic family is sometimes derisively alluded to as the possessor of a box and book, and ready thereafter and therefore to minister to their own ills, only calling in the trained medical man at a pinch, or in some critical condition. In our country the populace amuses and dopes itself with patent medicines, which, according to the gaudy literature issued by the monopolistic medicine firms with a lavish hand, will cure all the ills of man and woman-kind without the English bother of consulting

Clarke's Dictionary and running down the symptoms. Then when the three dozen bottles of Sarsaparilla have not only failed to cure the disease, but have brought the taker to within a few rods of the gates of eternity, then the nearest physician is called in and expected to heal all the breaches in the patent-medicine-poisoned patient in about two visits.

In our country the box-and-book have but little play. Our cities and towns, and indeed almost every little hamlet, now has its homeopathic practitioner: and as the American race is too busy to sit down and study out its ailments, the physician is more often consulted than in England. All this is not to say one unkind word of Bro. Clarke's Dictionary. If it were a new book it might be proper to review it in extenso. But it has been before the profession for several years, and the fact that it comes to us now in a new edition is eloquent of its worth. It is exceedingly refreshing to find the good words on the theory and practice of homeopathic medicine which the author has put in his introduction. It breathes the true faith. And a little touch of the master in this age and generation of doubt and skepticism may vote one old fogey, but it gives the feeling of having supped with Honesty and Homeopathy once more. As to alternation, Dr. Clarke says: "This is a practice which is to be guarded against. If two medicines seem almost equally indicated, it is best to decide upon one of them and give that. When the prescriber has seen whether it answers his expectations or not, he will be able to decide on the propriety of giving the other. To give both at the same time destroys the value of the observation and tends to weaken the prescriber's powers of diagnosing the remedy."

In other respects, Dr. Clarke is equally explicit and cautious. The book is a good companion for a busy man who has not all the time necessary to study every case. By referring to this Dictionary he is quickly put on the track of his remedy, or, if not that, he is not left in the dark as to what class of remedy he is to study and look for. We are glad to welcome this new edition to our working shelf and wish that it may have a wide sale among the American brethren as well as in the home of its author.

Globules.

It gives us much pleasure in announcing that our ever popular brother physician and indefatigable student and workman, Dr. B. F. Bailey of Lincoln, Neb., has been elected president of the Nebraska State Board of Health.

In our January 1 issue, on page 21, appears an extract from Dr. Selden H. Talcott's admirable address before the Cleveland Homeopathic Medical Society headed "Metaphoric Materia Medica," but which through an inadvertence failed to give proper credit to Dr. Talcott. We sincerely regret the omission.

The Newton Nerveine is sending out a very pretty little announcer of its successful establishment, and the addition of a new series of buildings. Dr. N. Emmons Paine is still in charge. This series of establishments is intended for the treatment of nervous invalids. It is situated in West Newton, Mass., apparently on an extension of Commonwealth Avenue, Boston.

We regret to announce that our ambitious young friend, Dr. Allison Clokey of Louisville, has had to lay by for a few weeks in order to recover from the prostration consequent upon too close application for nine years to a busy practice. At last accounts he was rusticated on one of the hills overlooking the city of Cincinnati. Dr. Clokey has given much of his last two months to a very peculiar and extremely difficult case at Lancaster. This illness is also one of the chief reasons for the temporary suspension of the *Guide*.

We note with no astonishment in this morning's paper that the Rev. Mr. Talmage, formerly of Brooklyn, has just contracted his third marriage, and that he is spending his flitter-wochen (honey-moon) in the west, taking in Chicago on the return trip. If our readers will remember, it was just two weeks ago, yesterday morning, that this eminent clergyman's picture occupied a part of two columns in the morning papers of all the principal cities with the usual thank-God letter attributing his (then) present strength to the use of Dr. Greene's Nervura—which is good for the nerves.

It gives us much pleasure to read a copy of the *Philadelphia Medical Journal*, because we find our old-time hard-hitter and all-around fighter, Dr. George M. Gould, wielding th' Arch Enchanter's wand. We have always entertained the unwritten opinion that the *Medical News* made a sad mistake in going to New York unless it carried Dr. Gould with it. Dr. Gould is aggressive and advanced in his ideas. It is true he hits homeopathy pretty hard occasionally:

but he fights fair for all that. One thing is very sure : that his writings are read ; which is more than can be said of ninety-nine per cent. of the editorial stuff that crosses the professional horizon.

They say, that at Put-in-Bay in 1878, the American Institute of Homeopathy rejected the application of one applicant because of his "mendacious" lying! A "mendacious" liar, be it remembered, is that kind of a liar who lies : argal, one who speaks not the truth.

The *New York Medical Times* had a silver-wedding issue in December, '97, and came to its readers' hands in blue and silver. Since *now* it seems in order to change journal names, eliminating the homeopathy part of the title, and thereafter being glad to quote the approbation of the *Medical Times*, it gives us some degree of satisfaction to recall that our coming-out party in medical journalism came on about the time that quarrel took place with the *Medical Times* for dropping the *Homeopathic* out of its title, and that even at that early day we were on the side of the *Times*, believing in its right to do so, and with but a solitary exception, or possibly two, we have been a consistent friend of that journal and always admired its freedom and independence. Well, here's wishing its editors another twenty-five years of success.

The Christy Saddle for 1898 is now being displayed by A. G. Spalding & Bros., and their agents throughout the country. If anything it is an improvement on last year's saddle, which was such a phenomenal success. The Christy Saddle has received the universal indorsement of the medical fraternity, and much of its success can be attributed to that indorsement ; in fact the sales of last year reached over three hundred thousand. Mr. A. G. Spalding himself claims that the large sales were primarily due to the fact that the saddle received the indorsement of the medical profession. This year the advance orders for the Christy Saddle are far beyond the expectations of the makers, because the different high-grade manufacturers are offering it now as a regular equipment, or as an option, on their wheels, without additional charge. Close onto one hundred makers have signified their intention of so offering it, simply because it is a high-grade equipment and one that has demonstrated its true worth. Doctors are interested in this saddle question, and they should be, owing to the fact that cycling has become so popular. Physicians should make themselves thoroughly conversant with anything that pertains to the bicycle, and if any doctor who reads this article will send to A. G. Spalding & Bros., New York, Chicago, or Philadelphia, for a Christy Saddle Bulletin, he will find in it some very interesting

matter pertaining to the saddle question and the construction of the Christy Saddle.

The *New York Press* says that John Brennan's neck was broken a year ago at Fort Hamilton by a fall. Doctors said he must die. He did. He died yesterday from heart disease.

The *Medical Visitor* has not only changed editors and publishers but also its form and color. It comes to us enlarged, minus that interminable and not always correct list of doctors in various States, with typography that is first-class, and in a yellow cover. Dr. Hoyne makes a brief adieu while Bro. Wilson A. Smith makes his best bow as successor. It has some good papers and, taken all in all, is a very pretty and very creditable journal. Long life and much success !

Dr. L. C. McElwee of St. Louis, the popular Registrar of the Missouri Homeopathic Medical College of that city, contemplates making an extended tour of Europe, beginning this coming spring. This trip is to be a combination of study and recreation. Dr. McElwee should have been with the Seven Homeopaths who gathered about that mahogany in Paris in August, 1896. Then he would have seen Paris and its ong-vee-rongs as he will never be able to see it alone. Or if he will wait until our next trip in 1900 we will take him under our wing and make him feel that it was good to have come.

Dr. Nicholas Bray of Dubuque, Ia., has sent us his book entitled, *A Characteristic Materia Medica, Presented in Reverse Order*. Dr. Bray has taken the parts of the body, following the Hahnemann schema, and arranged the principal symptoms of all the remedies under those special divisions ; while on the opposite page he gives the remedies. Thus on page 12, under paragraph 16, he gives the symptom "Thinks she is going crazy." And on the opposite page, under paragraph 16, he cites the remedies : "Cim., cal. c., ambr., can. ind., merc. viv., chel., cupr., iod." The intention of the author is to follow out this arrangement with all the various symptoms which the careful prescriber finds in his patient, and every time a remedy is repeated to draw a line under that remedy. At the conclusion of the searching, of course, that remedy having the most lines drawn under it will lead in the remedy to be given. From this it will be seen that Dr. Bray has given the profession a repertory of a novel kind, and one which, if properly used, will tend to unravel the knotty problem very many times. To be especially commended is the very evident care taken in selecting and arranging the symptoms, and also the brevity. The typology is of a better pattern than that to be found in many books. It is

large and clearly printed. And the binding is substantial and handsome. Boericke & Tafel are the agents for the book.

Pix-Cresol seems to be in charge of a recent number of *The Big Four*. Wonder why this is so? Where was Dr. Pyle, the editor, when the "make-up" was made up?

Dr. A. M. Cushing of Springfield, Mass., has, at our request, sent us a graft of his new heart remedy, the phaseolus, which, being used as per his directions, has done some good work in two of our cases. It is yet too soon to speak of the completed work: but it appears to us to be pregnant with great possibilities.

We learn that our distinguished friend and fellow-traveler, Professor W. A. Dewey of the Ann Arbor school, has just returned from a holiday visit to the Pacific Coast, where he was entertained in first-class style by his former colleagues and friends. Dr. Dewey is a good raconteur and a generally jolly good fellow. So say we, all of us.

Dr. J. E. Mann, formerly of Omaha, Neb., has been elected to the chair of eye, ear, nose and throat, in the faculty of the Southwestern Homeopathic Medical College. The election of Dr. Mann to this important chair in the Southwestern is all the indorsement necessary to introduce him to the homeopathic profession and laity of Louisville, the State, and the South. Dr. Mann has his office at 41 and 42 Fonda Block.

We are pleased to note that all the possible candidates for the chief office in the gift of The American Institute of Homeopathy, who are now being groomed by their friends, are young men and popular. We have yet to hear the first unkind word against any of them. Which is something unprecedented in the recent history of the Institute. It speaks in thunder tones for the renaissance of the young man and the West.

If you have a local homeopathic journal edited or published near you, be sure to forbid its editor making any mention of anything you may tell him, but promptly send that little information to Ann Arbor or Chicago for publication. That is one way of encouraging friendly relations with your home editor. When, then, he has an opportunity to review your fifteenth edition, he may be pleased to forget your using of him as a door mat.

And now comes the Rev. T. De Witt Talmage, "the most eminent preacher in the world," this blessed Saturday morning, with his picture and a letter in our daily paper recommending Greene's Nervura. There is nothing so very wonderful in that when we remember that once upon a time he used his name and his church for

the advertisement of the Keeley Gold Cure. But that which to us does seem wonderful is that there are still some few well-intentioned people who accuse us of being unjust to the cloth in some of our former criticisms.

The Century Magazine Co., after "running" "Hugh Wynne" and "Doc. Siphers" in its last volume, has now put these two serials in book form. One of these books, as everybody knows, is by a prominent physician of Philadelphia; and the other is a contribution by James Whitcomb Riley. Of the former naught but praise has been heard: of the latter, well, there are those who differ with Mr. Riley on the merit of this old doctor. He must certainly have lived in a long ago time and have been an exceptionally odd character.

To live one hundred years we are told not to eat any bread and to drink no water—save rain water. Lime should be abjured in every way, shape, or form. Vegetables all contain lime. Meats contain lime. Onions are admirable youth preservers; fish comes next; then rice; then eggs and pork. Wonderful how easy it is to become a living mummy, of no use to yourself, a hindrance and a stumbling block to the rest of mankind. Better let us live while we are alive, partaking of our daily bread, lobster salad, and champagne. There seems to us no excessive joy to be apprehended by the mere lengthening out of our days, a worn-out machine, living on onions, fish, and rice.

Our old homeopathic friends, the Munson & Co. Pharmacy of St. Louis, have sent us their annual catalogue. Remembering how progressive this firm has always been in its dealings with its patrons, we wonder that they do not start a homeopathic journal, hire some young doctor to lend his name as editor, and then at once proceed to claim that they are the largest and most popular subscribed for medical journal in the world. It might even descend to the interpolation of their firm name in the place of names found in such articles as they "borrowed" from the legitimate homeopathic press, thus killing two birds with one stone, advertising the remedy, and also their preparation of it. Decidedly Bro. Bockstruck is behind the times. Still there are lots and lots of homeopathic physicians in and about St. Louis who like to deal with the Munson firm. We used to, and would again if we lived in their bailiwick.

The American Homeopathist.

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FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



WILLIAM WOODBURN, M. D.,
Des Moines, Ia.

HIGH POTENCIES IN ENGLAND.

A RECENT paper and its discussions (published in the *Homeopathic Review* of London) by Dr. John McLachlan on "The Use of High Potencies in the Healing of the Sick" is interesting in that it gives a large idea of how *some* of the English homeopaths regard this subject.

THE paper was originally presented to the British Homeopathic Congress at Bristol, September 16, 1897, and is well written. But the subject-matter—high potencies—is as

dangerous of handling publicly in England as it has usually been in America. It is an immediate notice for a Kilkenny-cat fight. Every cure cited is either poooh-pooohed or denied. There is a fierce determination on the part of many of the profession everywhere to sinister not only the theory, but to belittle and maltreat the unfortunate proponent. Dr. McLachlan supports his arguments by frequent quotations from *The Organon*; he cites five cases of cures and apparently makes his point—that there *is* virtue in medicine which has not yet been located by any scientific process so far known. Thereupon the animals are let loose into the arena; then—Lord bless you!—the fur flies; and at the conclusion of the Roman half-holiday naught remains but a few bloody spots here and there!

THE first of these discussions is in the form of an (eye) opener by that redoubtable Sir Knight of the "Cyclopedia of Drug Pathogenesis," Dr. Richard Hughes, who seems to have had an opportunity to read and digest the paper at his leisure, and so prepare his science, his Latin, and his criticism that naught remained to be said after his closing sentence, save to accent his points by little pithy anecdotes concerning the washing of bottles a million times, etc. Dr. Hughes attacks Hahnemann and his *Organon*, ostensibly because the Fifth Edition contains the vital-force-theory, which by implication, and, indeed, in actual language, he said was the theory of Hahnemann's later days when he was past his prime; and, consequently, unsound. But the real reason was doubtlessly that the "Cyclopedia of Drug Pathogenesis" can find no foothold and no comfort in its pages. He makes large drafts upon modern science to prove the non-existence of a vital force. The great defect in these cases, he alleges, is that there is no evidence that the medicines were homeopathic to the disease! And there you are! But this is not a new argument. Every practitioner of but five years' professional life has heard that times out of number, and has had to put up his best argument in proof of his position. But, most singularly, it has, as a rule, been

uttered by the allopath and not by the competing homeopath. And we hazard the guess that the allopath in England, as in America, got his arrows from the quiver of some pathogenetic homeopath of the olden times.

* *

IN each of the cited cases no question is raised as to the recovery of the patient. Is not this evidence that the medicines were homeopathic to the disease? Oh, truly, they may have gotten well of themselves; or by the natural limitations of the disease, or the medicines of the preceding medical attendants might now have begun their curative work; or, possibly even a bottle of Lydia Pinkham's Compound (taken some several moons ago,) was in very deed the instrument in the hands of a benevolent Providence to bring health, and restoration to strength and activity, at the very moment when the high-potency man had given a few doses of his "moonshine." Of course that is *not* impossible. But that allegation is as pertinent of the 12th as it is of the 30th. The recovery of the patient is no evidence that the medicines were homeopathic to the disease, certainly not; but that inane fiddle-faddle about the manner in which the medicine was prepared, how it was "proved," and in what form it was administered, that, and that only is evidence.

* *

IN this country we had until recently two mighty giants of learning and vast medical experience: the German nobleman, Adolph Lippe, and nature's nobleman, Constantine Hering. Will any rationalizing man dare rise in his pew in the synagogue, having known these men and been participants in their work, and declare that this twain were unable to cure patients with the very highest potencies; or that they did not succeed in innumerable cases where the low-potency men had failed utterly and ignobly? Has the profession already forgotten that Sweet Melancthon of Homeopathy, Carroll Dunham, and his immortal two-hundredths? And that long list of homeopathic giants from Germany headed necessarily by the Master—were all these deceived? Were all their cures imaginary? And that constantly augmenting host of living physicians in Germany and America who find comfort for the afflicted and bread for themselves in the higher potencies—these men who live in this scientific age and know what it is, as Hahnemann could not know—are all these men mountebanks and liars?

* *

AND still Dr. Hughes, who cannot escape the charge that he certainly knows of these men dead and gone, and is acquainted with many of the latter-day host who use the high potency—still Dr. Hughes is so wrapped up

in the contemplation of his theory that he dares to argue with the client "that they can't put you in jail!" He goes out of his way to attack the symptomatology of Guernsey; he puts his foot on Hering's Guiding Symptoms; he questions the verity of the *magister*—Hahnemann—everything and everybody is wrong but this lonely twelfth jurymen—the author in great part, if not in whole, of the "Cyclopedia of Drug Pathogenesis." In short there is no god but god, and he is Pathogenesis! This able disputant, and his overlearned and overstudied brethren of the pathogenetic wing we fancy would refuse to be cured of blindness unless the loam was properly and pathogenetically "proved"; and the spittle rendered duly aseptic and perhaps passed through a Winchester quart. The pity is not "that we should weight homeopathy injuriously with these unimaginable potencies," but the rather that Dr. Hughes should have brought his Chair of Pathogenesis to the water's brink, and commanded the homeopathic investigation to cease or recede! And lo! the waters refuse to obey! And threaten to engulf him!

* *

DR. DYCE BROWN, one of the distinguished editors of the *Review*, took up the cudgel (and the *only* one for the essayist). He said:

"Dr. McLachlan speaks of the vital force; Dr. Hughes pooh-poohs it and thinks it does not exist. There is no actual proof of it. But say what you will, call it what you like, it seems to me that there is something which is immaterial and peculiar in the reaction of the body to high dilutions. We need not discuss the point whether c. m. or the millionth (as in one of the cases was used) are illustrations of this or not. A sufficient illustration of the wonderful vital reaction—call it that, or vital force, or anything you like, but it is something different from chemistry or from pure materialism—is shown in the 30th dilution. If you admit the curative value of the 30th dilution, I do not see where you are to stop. I should be very sorry to pooh-pooh any cases that are recorded as having been cured by dilutions considerably higher than the 30th; because, if you once admit the 30th, you admit the whole argument. Therefore, I think we must allow the existence of something—call it vital force, or what you like—something very peculiar in the vital organism that reacts upon medicines that are absolutely inconceivable when you put them down in figures."

* *

DR. ROCHE was moved to tell that ancient "chestnut" about calcarea carb. 200th curing a crop of warts; and his witticisms were received with becoming merriment and satisfaction. Of course calcarea carb. cannot do any

such thing, because it has never been found to do so under the 12th in the "Cyclopedia of Drug Pathogenesis." It does not matter that this class of cases and many others, attested by irreproachable witnesses, has been in the annals of the profession, written and unwritten, almost from the beginning of Homeopathy. It can't be so; therefore, it isn't so!

* *

DR. ORD, of whom we expected better things, takes a hand in making both the essayist and his paper duly ridiculous, and succeeds.

And, lastly, the fatherly and dignified President helps to round out the measure of burlesquerie by pointing out that Dr. McLachlan is still a young practitioner; that possibly, if he lives long enough, he may gather both age and pathogenetic wisdom and be more worthy to sit in the councils of his peers. The President was quite fatherly in his advice to the essayist, cautioning him not to rationalize too much; to observe more accurately; then his results may eventually square with the preconceived pluperfection of the pathogenetic English homeopath and be found worthy of recording. A pleasant way of saying that he is afflicted with Pitt's disease of youthfulness. Though how an ambitious homeopath may strike the happy mean between extreme youth, and the Hahnemannian too-old, is nowhere set down in this President's address. It must have been very evident at the conclusion of the Presidential homily that, if a member *would* insist upon bringing such unpathogenetic trash as the high potency into an assembly of the British Homeopathic Congress, he must not be surprised if not only his paper but his age, his person, and his church membership are made subjects of popular criticism.

* *

WE trust that Dr. McLachlan will try no further experiments upon his English brethren in the way of showing them how to suck eggs.*

The pathogenetic homeopath of England has closed his books—unless it be to discover some specific for treating diabetes with or without Winchester quarts. Beyond *his* scientific Drug Provings, made with the 12th cent. and lower, several removes lower, there is nothing. Hahnemann and his Homeopathy, and a cure performed with the 13th cent. are no longer scientific; hence they are Anathema—as well as the proponent thereof. We are the law. What we say is the law. And there is no other law. Indeed it isn't a law at all; only a rule. A Doctor who reports a cure with a potency higher than the 30th cent. is either a liar or a fool; for has not Dr. Hughes with infinite

* With apologies to the *Northeastern Medical Gazette* for lapses from journalistic dignity.

patience, after a long study and scientific investigation secured knowledge absolute of that immaterial something which in the 12th cent. effects the cure; and is he not irrepressibly ready to show, beyond the peradventure of a doubt, that that same something which cures in the 12th does not inhere in the 13th—to say naught of the 30th or the 200th and worse!

* *

IT has always seemed to us as singular that, in America at least, the book-makers and teachers—excluding of course the surgical wing—were and are to this hour high-potency men. Do we not speak truly? Would this tend to show that, perhaps, a specialist knows his specialty best; and that a materia medica man, who is, after all, the true homeopath (with no offense to the surgeons) is better qualified to speak of the action of drugs in the varying potencies than the other wings of the profession. That Dr. Hughes should be alone on the outside in this matter is the exception which proves the rule. In America, nay even in the present American Institute of Homeopathy, it is no longer a bull-baiting occasion to speak of a cure performed by the high potency. And it is no longer an infrequent occurrence to be told by the old-style practitioners that he tried one of those "moonshine" potencies in one of his desperate cases last week or month or several months ago, without a particle of faith in the outcome, and, yet, the patient recovered! We are convinced that much of the prevalent skepticism in homeopathic circles is the result of just such narrow teachings as were given in evidence in the Discussions quoted above. But thanks to the rapidly changing methods of teaching materia medica in the American schools, the alternating, and combining, and scientific pathogenetic homeopathy (Limited) is rapidly disappearing, and the Homeopathy of Hahnemann taking its place!

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

CLINICAL CONFIRMATIONS.

Mercurius Corr. in LOCOMOTOR ATAXIA.—

Delamater of Chicago¹⁵ records the case of a man thirty-nine years of age who presented all the classical tabetic symptoms, including gait, ataxia, lost knee-jerks, and anæsthesia, together with a history of probable syphilitic infection,

at the age of twenty-seven. The diagnosis of locomotor ataxia was made unhesitatingly, and merc. corr. 3x trit. was given three times a day. For a month he reported steady improvement, but two weeks later he did not seem so well, and complained that the legs were colder, pains more severe, and formication in legs and feet. Ergot 3x trit. was given for two weeks. At the end of that period he was improved, and merc. corr. 3x was resumed. At the end of six months every trace of the trouble had disappeared, and six months later he was still in apparently perfect health.

Was it locomotor ataxia? The symptoms and history seemed conclusive, but Professor Delamater does not believe that there could have been any sclerosed tissue in the patient's anatomy. It seems impossible that any remedy could cause such nutritive changes that in so short a time sclerosed tissue could be replaced by healthy. He is inclined to believe the condition simply one of congestion of the cord, and that the use of ergot for two weeks was sufficient to constrict the blood vessels, while merc. corr. assisted in the process by its action on the blood.

Gelsemium IN PUERPERAL CONVULSIONS.—Mrs. G., aged twenty-four years; expecting her fourth child, complained of a raging headache, the fingers were convulsively closed, the feet icy cold, the head hot, the face bloated. I had warming-pans applied to the feet and sent home for tincture of gelsemium.

Five minutes after my arrival she had the first convulsion, and this was followed by five more; these were more violent than any I had ever seen before. There were no labor pains, but the water had passed off the day before, as the nurse reported. The os uteri was only slightly dilated. I at once mixed twenty drops of tincture of gelsemium with half a tumblerful of water, and gave a teaspoonful every five minutes, but had much trouble in getting her to swallow. In half an hour the muscles began to relax somewhat and the convulsions diminished, and after an hour the patient regained her consciousness, the pulse was softer, and all the symptoms milder.

Next morning I found the patient cheerful and bright; the headache, from which she had suffered almost continually for almost fourteen

days, had almost disappeared. The patient was directed to keep her bed and received gelsemium 3x every three hours for two weeks. Then I was again called and found the patient in full labor, but the parts were very dry and hot. I had the parts well anointed with oil, and in ten minutes there followed the delivery of a healthy girl.

Lachesis IN PROLAPSUS RECTI.—Dr. A. C. Bhaduri⁹ of Calcutta was called one day last September, at about 5 P. M., to see a case of prolapsus recti. He says: "On going to the patient's house, I found him in extreme agony, owing to the sphincter ani being in a tonic state of contraction, tightly closing upon the prolapsed rectum. There was a throbbing pain at that part, it was extremely tender and painful. On manipulating the part in the hope of replacing the prolapsed portion of the rectum, the tenderness and painfulness increased so much that the patient would not allow us even to touch it again. We found that unless the part be replaced soon, there was every chance of gangrene setting in. So we at once determined to select an appropriate medicine, and on finding a stitching pain passing upward, and the other symptoms corresponding, I prescribed lachesis 30 and gave one dose then and there, and left few more doses with the patient, to be repeated, if necessary. In the mean time, we thought it advisable to provide ourselves with everything necessary to put the patient under chloroform and then try to replace the rectum; so we went home, promising to return as soon as possible. On reaching home, as I was preparing to start for the patient's house, his eldest son, a student of medicine, came to me, to my great satisfaction, to give me the news that his father's rectum had got in within an hour after the administration of the medicine, and he was feeling all right. He unhesitatingly declared that such action from internal medication could never have been obtained in the so-called rational system of medicine."

MEDICAL MEMORANDA.

New Theory of Drug Selection.—Dr. A. W. Woodward¹⁰ has observed in the proving of lycopodium the sequence of physiological disturbance caused by the drug. He notes that

there is a primary digestive disturbance, followed by cutaneous, respiratory, spinal, and genito-urinary symptoms. Adopting the hypothesis that the drug is useful in any disease in the course of which this sequence is observed, or where the associated symptoms present this relative degree of severity, he finds it illustrated in a number of reports of cures from representative homeopaths.

A similar study of lachesis results in the determination of the sequence—cutaneous, respiratory or circulatory, digestive, and finally mental and spinal. He notes that the symptoms not only appear in that order, but are relatively prominent in the same order. Clinical evidence to the same effect is adduced. Dr. Woodward concludes that the homeopathic totality of indications will hereafter be found more certainly in a *group of disturbed functions* rather than in a *group of special symptoms*. He suggests that if it should be found that each group of disturbed functions stand for one particular remedy, we will have taken one more step toward practical and scientific therapeutics.

Periploca Græca AS A CARDIAC STIMULANT.—Dr. Bourginsky³⁷ reports that this asclepiadaceous plant—indigenous to Greece, western Asia, and southern Europe, and naturalized in the western part of the State of New York, and known by the common names of climbing dog's-bane, milk-vine, silk-vine, Syrian silk-plant, and Virginian silk—contains a glucoside, periplocin, which he regards as an isomer or polymer of Schmiedeberg's digitalin. From experiments on frogs he concludes that the plant contains a heart-poison that acts like the other cardiacs on the function of the heart. In large doses it stimulates also the respiratory and vomiting centers. Its antagonist is atropine. The fluid extract may be given in doses of from 5 to 10 drops, and periplocin in doses of 1-30 grains.

Peripheral Neuritis from Arsenic.³⁷—Dr. Colman showed a girl, aged twelve, who was admitted to the Queen Square Hospital in December, 1897, with the following history: From September 27 to October 28, at another hospital (with the exception of six days, when the treatment was discontinued on account of gastric disturbance), she was given 15 minims of liquor arsenicalis three times a day for the cure

of chorea. She left that hospital cured of the chorea and apparently quite well. On November 10 she complained that her legs were weak and tingled; in another week there was distinct ankle drop. When admitted to Queen Square there was almost complete paralysis of all muscles of the extensors below the knees, with well-marked reaction of degeneration. There was also some weakness of the extensor muscles in the forearm, with diminished faradic reaction but no reaction of degeneration. There was no alteration of cutaneous sensibility, but there was great tenderness of the leg muscles. There was well-marked arsenical pigmentation in the neck and groins. She had been kept in bed and treated by massage and electricity, and she was rapidly recovering. The case was of interest by reason of the delay that occurred between the cessation of the arsenical treatment and the onset of the symptoms. It also showed that these somewhat heroic doses of arsenic, which were so highly vaunted in the treatment of chorea, were not unattended by serious risk. Several instances of similar paralyses had come under his notice, and in one, at any rate, recovery did not take place.

Dr. Beevor observed that one ought to be very careful in the use of this drug. He had had a case in an adult who took 15 minims thrice daily for six weeks, and then presented double wrist drop with severe pain in the legs, but after two years recovered.

Arecoline AS A MYOTIC.—Bietti³⁷ has been investigating the action of this alkaloid obtained from areca or betel nut. A 1 per cent. solution instilled into the conjunctival sac causes some burning and lachrymation and hyperæmia. After four or five minutes the pupil begins to contract, maximal contraction being reached in about twelve minutes; this lasts a quarter of an hour, after which the pupil regains its normal size in about two hours, or three hours if a 2 per cent. hydrobromate solution is used. At the third minute the ciliary muscle begins to contract, as shown by approximation of the near point; this goes on to a maximum till the tenth or twelfth minute, after which the near point recedes to its normal position in the course of forty or fifty minutes. Cocaine in 4 per cent. solution does not hinder the action of arecoline

on the pupil. Arecoline is unable to overcome the mydriatic action of atropine or scopolamine. In the case of a woman with simple glaucoma in both eyes, arecoline produced contractions of the pupil where 1 per cent. eserine failed. It would appear to act more promptly and more energetically than eserine, but its duration of action is less.

Poisoning with Carline Thistle.—Dr. Them. Zammit¹ of Malta records this case, which occurred at Bahria, Citta Vecchia, in the third week of November. The carline thistle (local name, Xeukit-il-Miskta) is the *carlina gummifera* (Dec.), *atractylis gummifera* (Lin.), a plant common in Malta and in other countries on the shores of the Mediterranean. It is notable for its root, which can grow to enormous proportions, and for its purple composite flower surrounded by radical spinous leaves.

Three children ate the root of one of these plants, which they cut with a knife; two of them, a girl aged eight years and a boy aged nine, eating it rather freely. They ate it on a Wednesday afternoon, and did not complain at all before the catastrophe came on. On Thursday evening the girl was taken ill, and the parents were soon alarmed at the stertorous breathing and at the drowsiness of the child. There was some retching, but no actual vomiting. Early in the morning the child became collapsed and died before any medical aid could be got. In the evening of Friday the boy returned home and refused to eat. He was told that the girl had died, and he confessed that they had been eating some roots the day before. He went to bed, and soon after the family were startled at his difficult breathing. The father of the girl (the children were cousins) was sent for, and he declared that his daughter had suffered in the same way. The district medical officer was hastily called, but it was too late, as the boy died a few hours after, comatose and with marked signs of asphyxia.

At the *post-mortem* examination the two bodies had the same appearance. The tongue protruded slightly between the lips, the pupils were greatly dilated. The appearance consisted in a general congestion in the venous system. In the girl all the organs were highly congested, the lungs and the brains especially so. The stomach

showed capillary injection in limited areas. It contained a brown liquid, in which fibers of the ingested root were identified. The intestines were congested and contained abundant solid feces. The heart in both cases was flaccid, and contained a little dark fluid blood.

In the boy the congestion was not so well marked in the organs, with the exception of the brain, of which the veins were injected to the extreme. No trace of the root could be found in the stomach, but the fibers were found abundantly in the intestines, which contained a very great quantity of solid feces. No attempt was made to examine chemically the organs, as the poisonous principle of the plant is not known to me.

The third child, a boy of about twelve years of age, ate a small quantity of the root. Up to Saturday morning he did not complain of the least ailment, but he was given a good dose of castor oil, which he very much needed, and is well.

NOTES FROM MR. WRIGHT'S SURGICAL CLINIC AT THE LONDON HOMEOPATHIC HOSPITAL.*

Posterior Urethritis: Its Diagnosis and Treatment.

This patient had suffered from a slight gleet for many years as the result of an attack of gonorrhea. He has been treated at other hospitals for this condition, and has had catheters passed to dilate a stricture which was said to be present. He says that he has a gleety discharge from the urethra, which at times becomes thick, and can be "milked" out from the deeper parts. The urine is often cloudy. There is some smarting and stinging during micturition at the base of the bladder, and at times pain at the end of the penis. His general health is good so long as the bowels act regularly, but there is a tendency to constipation. Examination shows the penis small in size, with a much constricted meatus, which only admits a No. 5 English catheter. This passes the rest of the way easily without obstruction, but causes some pain as the deep urethra is entered. This pain lasts some time, but is relieved by making the patient hold the end of the penis in water

* One of the series of Post-graduate Lectures, reported in the *Monthly Homeopathic Review*.

comfortably hot. (This plan is a good one, and may be made use of to allay dysuria of cystitis and prostatitis, the patient holding the penis in hot water while he is micturating.)

Examination of the rectum shows nothing abnormal in its mucosa, but the prostate is decidedly tender and perhaps a little larger than natural.

The first treatment to be adopted here is to slit up the meatus. Such a narrow meatus will keep up a gleet just as much as a narrowing of the deeper part of the urethra by a stricture will do the same, and with its cure the gleet will much diminish. The meatus can be incised toward the frenum with a meatotomy knife without an anæsthetic, and with very little pain to the patient if properly done. Some gauze must be inserted between the edges of the cut to prevent union, and in a week the parts will have healed; the patient being instructed to pass a bougie every day. Further treatment can then be adopted.

The next patient is complaining of exactly the same symptoms as the former one, but in his case the meatus is normal, so we can proceed to examine him, as we should have done in the former case, had the meatus not needed treatment first.

The first thing to do is to apply the "two-glass test." The patient passes water into two separate glasses for examination. The urine thus passed is found to contain long thread-like bodies ("tripper fäden" of the German authors) which gradually sink to the bottom of the vessel. If the first sample only contained these, and the second was free, we can diagnose that the anterior part only of the urethra is affected, the posterior part being free. The first gush of water washes them out, and the second part is clear. You will remember that gonorrhea starts at the meatus and spreads backward, and may not affect the deeper parts, or may remain there after the anterior part is cured.

To diagnose a posterior urethritis,—that is to say, a urethritis of the prostatic inch behind the triangular ligament,—we should first pass a catheter down to the bulb, *i. e.*, about five inches down, and wash out the anterior urethra through this. This is easily accomplished by means of

hydrostatic pressure, the fluid running out at the meatus if the catheter be not so large as to quite fill it, as it cannot pass the compressor urethræ muscle which surrounds the membranous portion and acts as a stop-cock at this point. The anterior urethra being thus cleansed, make the patient pass water again into two glasses. If the first is cloudy and the second clear a posterior urethritis is present, as the first gush has washed this part clean, and the rest that follows is unaffected.

It often happens that the second portion is also cloudy or contains pus. This means one of three things: First, that cystitis is present, which can usually be diagnosed by its special symptoms; or, secondly, that pyelitis is present, which can also be diagnosed by its symptoms and microscopic examination of the urine; or, thirdly, that the turbidity arises from mucus or pus originating in the posterior urethra and flowing back into the bladder. This is quite feasible, since the contraction of the compressor urethræ is stronger than that of the sphincter of the bladder, and the former prevents the discharge coming forward, and so it has to flow backward into the bladder, and thus mingles with the urine.

In this case, after washing out the anterior urethra, the contents of the first glass only were cloudy, and the indications are plain that we have to deal with a posterior urethritis.

We will now pass a bulbous bougie to ascertain whether there is any stricture. These bougies are all the same size in the shank; but the bulbous part, which is somewhat conical in shape, is made in different sizes. The meatus of this patient will admit a fairly large-sized one—a No. 8 English—and it passes as far as the triangular ligament easily. On withdrawing it no obstruction is met with. If there had been a stricture, the blunt part of the bulb, in withdrawing the instrument, would have caught in it. These instruments are much more certain in finding out a stricture than sounds, for the latter will often pass a stricture of large caliber,—that is, one which is not a tight one,—without giving any sense of obstruction, but a bulbous bougie will catch in it as it is being withdrawn.

We may now conclude that there is no stricture, and that we have now only to deal

with the posterior urethritis, which was diagnosed by the "two-glass" test. Such cases are often extremely troublesome, and they may tax your knowledge and powers of treatment to the utmost extent. They usually need both local and internal treatment. Slight cases will often be cured by the alternate application of dry heat and cold to the deep urethra. This is done by using steel sounds, which are made hot by putting into hot water, and after one hot one has been passed a cold one should follow. This may be repeated several times at a sitting, and two or three sittings a week until the symptoms show a great improvement, when less frequently will suffice. In passing these sounds do not use oil or vaselin as a lubricant, but anoint them well with soap. This enables you to pass them easily in sufficiently moist, and, moreover, you will find that on withdrawing the sound a quantity of mucus will be clinging to it. Thus you actually cleanse the urethra at the same time, and with oil or vaselin you will not accomplish this.

In more obstinate cases local medication will be needed. One of the best applications is a solution of nitrate of silver. This should be made with an *Utzmann's* catheter, which will deposit the lotion in the prostatic urethra. Begin by injecting about 5 or 10 minims of a solution of the strength of 5 gr. ad \mathfrak{z} i. every other day, and increase this gradually, if need be, up to 40 gr. ad \mathfrak{z} i. These stronger solutions should, however, be employed only twice a week.

It often happens that with this posterior urethritis there is some cystitis, and in such cases a vesical injection of weak baro-glyceride lotion may be used at the same time.

So far as internal remedies are concerned, there are many which do good, but the unfortunate part is that often, apart from the gleet, no other guiding symptoms are present. If tenesmus, strangury, etc., are present, cantharis is by far the best, but apart from this, iodide of sulphur, ferrum picricum, and capsicum are often of service. I do not think I can give you any precise indications for your choice of these, but I would remind you that you can often gain a knowledge of the condition of the deep urethra by examining the mucous membrane of the anterior part by everting the lips of the meatus,

and I think that if you find this part of a dull and more or less congested appearance, iodide of sulphur will most likely give benefit; whereas, if it is pale, the ferrum salt will do good. Capsicum is usually best in alcoholics. Thuja is said to be good, but so far in my own practice it has been a failure for the chronic condition, and I never now employ it.

On the Treatment of Old Sinuses.

Most of you have, ere this, found how difficult it often is to get a deep chronic sinus to heal up. I have found this also, but I think that I have also had considerable success in certain cases by treatment upon definite lines. I have certainly been able to cure, in not a few instances, cases which have frequently had much treatment without permanent benefit, and as the plan may be useful to you, I will show you how it may be carried out.

This patient has a sinus in the lumbar region, the result of an operation some years ago on the kidney. He says that it will not heal, and that a quantity of pus comes away. On probing, the sinus bleeds a little; a thin probe goes in about two inches. No dead bone can be felt. The walls of the sinus grate somewhat as the probe passes in, showing the presence of a good deal of fibrous tissue around. The first case in which I had a signal success in the kind of treatment I am going to relate, was one of a similar nature to that under treatment. The patient was a woman who had two calculi removed two years previously from the left kidney, and a sinus had formed after the operation and had refused to heal; a large quantity of pus came away, and so weakened and troubled the patient that she was advised by the surgeon who had done the operation to have the kidney excised. This she refused to do, and consulted me with a view to a cure without operation. I did not hold out much hope of doing this, but I was gratified when the sinus healed up rapidly as a result of the treatment adopted. I have treated many cases since then, and I must confess that I have not cured all. One thing I must tell you, that you need never expect to cure those cases dependent upon necrosed bone or other foreign body until the offending substance has been removed.

Now, if you study the pathology of a sinus,

you will readily have a clew to the method of healing it. To this end, let us mentally lay open the sinus and see what we have to deal with. First, there is around the part which immediately abuts on the skin a slight covering of epithelium. This is continued from the skin down into the sinus, but stops after a short distance. Next, the remainder of the floor is formed of more or less unhealthy granulation tissue lying upon a bed of dense fibrous tissue.

Now each of these elements has to be to some extent removed, or replaced by more healthy material, before we can expect healing. How is this done in other parts of the body? If we compare this condition of things with an ordinary callous ulcer of the leg, such as we meet with every day in the out-patient department, you will see that the two conditions correspond practically in all particulars, and what cures one will, if applied in a proper way, more often than not cure the other. In the case of a callous ulcer we exert pressure by strapping to get an absorption of the underlying fibrous tissue, and this being accomplished, we apply some stimulating application to the surface, having first cleansed it and got rid of all unhealthy elements as far as possible.

The same steps must be taken in the case of the sinus. First, then, how are we to apply the pressure to the walls to get absorption of the fibrous tissue? This may be done in the following way, namely, by thoroughly dilating the sinus with graduated probes until you can insert a laminaria tent along its whole length. The tent may be left in a day or longer, and you will then find that half your difficulty is over, for the walls of the sinus will by that time have been rendered soft and yielding. This may be repeated if required, and in some cases it is only necessary to dilate with the probes without doing more. The pressure thus applied will cause much of the fibrous tissue to be absorbed, and healing will commence. We must now cleanse the lining of the sinus as far as possible. This is a matter which might present some difficulties. Of course, you may inject various antiseptics, which are often sufficient, but lately my plan has been to inject as much as the sinus will hold of

elixir of lactated pepsin.* This contains pepsin, pancreatin, lactic acid, maltose, and hydrochloric acid, and the digestive action of these is exerted upon the unhealthy elements contained in the sinus walls. This is left in for half an hour or so, and then washed out and *lotio rubra* injected. The application is now completed. This may be repeated as often as is necessary, but I usually find that one or two dilatations, instillations of the digestive fluid two or three times weekly, and daily injection of *lotio rubra*, previously washing out with some weak antiseptic on the days when the lactated pepsin is not used, is the best method to pursue. If the epithelial layer has extended any considerable distance into the sinus, it will be necessary to remove this. This may be done easily after the dilatation by scraping with a sharp spoon, or the application of nitrate of silver or sulphate of copper or cocaine may be injected, and the mouth of the sinus freshened up with a tenotome. Lastly, I should mention that to all my patients I give silica 3 trit. or nat. silicosum 2x dil. at the same time as the above treatment is being carried out. The above method is, I believe you will find, often as rapid in effecting a cure as completely laying open the sinus and allowing it to heal up from the bottom. At any rate, it can be carried out by the patient, with occasional supervision by the medical man, and there is no necessity for lying up, an advantage which most patients will be glad to avail themselves of.

For a bruised shoulder, hip, or lame back use a flannel cloth wet with kerosene, pinned to under-clothing and worn for several days, occasionally rewetting.

* More recently I have preferred the following preparation:

Taka Diastase.....	gr. $\frac{1}{2}$
Pepsin	gr. i
Acid Hydrochlor	℥ ix
Aq. Dest.....	℥. $\frac{3}{4}$ x

Mix the water and hydrochloric acid by shaking well; then add the pepsin and taka diastase and again shake well and pass through the Pasteur Chamberland filter.

The pepsin and taka diastase are prepared by Parke, Davis & Co. I find the above a good lotion to use as instillations in very chronic otorrhœa with granulations in the tympanum.

Roughly speaking, this is a 1-5000 solution of pepsin, and the hydrochloric acid is present to the extent of 0.2 per cent., as in gastric juice. It is not necessary to filter the solution for treating sinuses.

TREPHINING FOR EXTRAVASATIONS.

SEVERAL of our old-school exchanges contain accounts, more or less complete, of an operation by Dr. Robert T. Morris, the veriform-appendix celebrity, in which—the operation—he removed a large piece of bone over the ascending frontal and parietal convolutions. The patient, fifty-six years old, had been a sufferer from chronic bronchitis, and in a fit of coughing had ruptured a blood vessel in the left hemisphere of the brain, resulting in paralysis. When Dr. Morris arrived the patient was unconscious. On opening the meninges, a large quantity of bloody serum escaped and almost instantly the patient's pulse and respiration became normal. The patient promised to make a good recovery, and by the eleventh day was sitting up and taking nourishment; when there suddenly developed a hypostatic pneumonia and the patient died the next day. So that the operation, as usual, was successful.

Dr. William T. Miller of the Cleveland Homeopathic Medical College was more fortunate. At one of the meetings of the Cleveland Homeopathic Society last fall, he introduced upon the platform a middle-aged woman, who had come to the Huron Street Hospital suffering with the most excruciating pains in the head, which had been her condition for a long time preceding, so that life had ceased to be worth living. Dr. Miller reached the conclusion from the definite localization of the intense pain always in one particular region, one might almost say in one particular spot above the left temple, that there was some local cause for the headache. Thereupon he trephined in that region, lifted the bit of bone out, found extensive extravasation of blood at the site, drained it, replaced the skull-plate, and the woman made an uneventful recovery with no more headaches.

FULTON INSANE ASYLUM.

DR. S. C. DELAP of Kansas City prints a letter in one of the dailies of his city in which he reviews the conduct of the Insane Asylum at Fulton, which the Governor has placed in charge of a homeopath. Among many other pertinent things Dr. Delap states the following:

"When the homeopaths took charge of the Fulton asylum, April 12, 1897, the asylum was full, containing 643 patients. Dr. Coombs soon found that he could make arrangements whereby 70 more could be accommodated. December 12, 1897, the number of patients had increased to 687. A lawn of six acres was made with 5000 loads of earth, at an expense of only \$50 to the State. When the old school was in charge 20 of the inmates rendered service to the institution. Now 100 are at work. From April 12, 1896, to December 12, 1896, the average daily cost per capita was 44½ cents. For the corresponding period of 1897 the cost was 44 cents, with an increased purchase of 30,000 pounds of beef and 500 pounds of bacon. The amount voted by the legislature for the support of the institution was \$15,000. Upon taking charge the amount paid employees was \$2850 per month. Now the amount is \$2462. Up to April 12, 1897, the former management had already used \$6798 of the \$15,000 appropriation. Now the fund accredited to the institution is \$14,000, showing that under the management of Dr. Coombs the institution has not only maintained itself, but has actually earned a snug sum, and this, notwithstanding the fact that a complete water plant was added to the institution, whereby fresh water is continuously pumped all over the buildings.

"But, from another standpoint, a greater saving has been secured and one that appeals equally to all citizens of the State—the cure of the insane and the saving of life. From April 12, 1895, to December 12, 1895, 58 cases were discharged and 37 died. During the corresponding period of last year 68 cases were discharged and 28 died. In other words the homeopaths cured 10 more and saved the lives of 9 more than the allopaths. The explanation of accident does not apply, as other asylums where homeopathy is practiced tell the same tale. It is not an innovation, as the speakers would have us believe, for homeopaths to be intrusted with the State insane asylums. The homeopaths have two in New York and one each in Massachusetts, Michigan, Minnesota, Illinois, and California. All show a like contrast when compared with old-school asylums. Even the one in Michigan, at Iona, where the insane criminals of the State are confined, the homeopathic treatment shows a larger percentage of cures and fewer deaths than does the record of the old-school asylums of the State where no criminals are received."

This is indeed a gratifying record and most eloquently puts a quietus on the arguments of the allopaths that the homeopaths are quacks and incompetents. It also shows the greater superiority of homeopathic medication over the therapeutics of the old school. Doesn't it? But hold! There must be some mistake about this. Hasn't Delap heard that the Hahnemannian Materia Medica is full of chaff and of false beacons and untrustworthy, and needs to be renovated, and the Baltimore investigation plan (based on the "Cyclopedia of Drug Pathogenesis") substituted therefor? If he hasn't, he ought to attend the American Institute of Homeopathy and keep posted. Otherwise he wouldn't try to fool the poor deluded people of Missouri by parading a lot of laudatory statistics proving that there is any good in Homeopathy. Sir?

THE FRENCH WIFE.

IT will doubtlessly seem to that handful of reverent homeopathic pilgrims from America, who, on a memorable day in August, 1896, after much difficulty found the unmarked and sorely neglected grave of Hahnemann in Paris—it will seem to them like a bit of unmitigated “gall” for any of the French wife’s present relatives, heirs, or descendants, to *now* make lurid and dramatic professions of esteem and affection for the Great Master of Homeopathy; and to couple this belated contrition with a proviso (for graciously consenting to let a generation of strangers do honor to the mortal remains of Hahnemann) that the bodies of Hahnemann and his French wife be not separated! Not separated! As if they had ever rested together! It was a shame—a way, deep-down, most damnable shame—for the French wife to bury Hahnemann like an outcast! To thrust him barely cold, in death, like a pauper, at break of day, without religious ceremony either at the house or elsewhere, into a second-hand tomb, already tenanted by two ex-friends of the French wife! To utterly neglect his memory after having so signally profited by the alliance! To forbid others, more kindly disposed, to attend the funeral and do him some slight honor!

Not a flower, not a sprig of any living thing, not a mortuary token of any description in, on, or about this borrowed tomb! Not a mark of the chisel, not a letter, or character of any kind whatsoever on the plain slab covering his parttenancy of a rented tomb to indicate that it also contained the remains of one of the world’s greatest philanthropists and philosophers—to say naught of its bearing Hahnemann’s own selection of mural motto, “Non inutilis vixi.” Even the remnant of that iron railing which “Old Hahnemann” of Philadelphia had once put about the unlettered site was rust-eaten, and the former zinc canopy which had accompanied it had wholly disappeared. The body of the Most Excellent High-Priest of Homeopathy—whose name will be in men’s hearts and on men’s lips to the end of time—shunted hurriedly and indecently out of sight like some pestilential thing, in the early candle-light, in gloom,

and rain, and secrecy, into a corner of a Parisian cemetery! While near by, having survived the illustrious dead until 1878—long enough in all reason to have made some halting and belated amends for the initial neglect of the remains—while in a near-by grave, lies the French wife all to herself, in a costly tomb, elaborately engraved, fulsomely reciting her several names, her age, her station, and her many virtues! *Ainsi, soit-il!*

No! By the Eternal! They must not—shall not lie together in the new interment! If “Old Hahnemann” College does not own this tomb of our Great Founder, by right of money paid the French authorities at a time when, but for this seasonable American charity, the mortal remains of Samuel Hahnemann would have been ignominiously dumped on a charnel heap, then let us Americans make up a quick purse and forever take the grave out of heirs’ hands—those loving heirs, who, now, after the lapse of half a century, are suddenly become grief-stricken and liable to forget their claims of from ten to fifty thousand dollars for Hahnemann’s literary remains, while they give their passing and gracious consent to honoring the Illustrious Man of Medicine—and his French wife! Then, having quieted all possible legal complications, turn the tomb over to our present-day French brethren, the French Homeopathic Society, who have been fighting for years for the possession of the Hahnemann remains, and let *them* raise the body of our first Grand Master from its temporary and dishonoring sepulture in “the rubbish of the Temple” and prepare it for a more decent interment in a place, amid surroundings and with such honors as the works of Hahnemann entitle him to! Or send the body to this country. We will go bail that McClelland, Kinne, Talbot, and from five to twenty thousand more of true American homeopathic hearts would not long permit the remains of Samuel Hahnemann to lie in a borrowed or unhonored grave in American soil! The body is embalmed, we are informed; why cannot this be done? At any rate, Homeopathy owes NOTHING to the French wife! Nor to any of her mercenary descendants! Away with her, and them!

WILL THE INSTITUTE RECONSIDER ?

AT Detroit, despite the objections urged (we believe) by the vice-chairman of the Board of Censors of the American Institute of Homeopathy, two applicants for membership in the Institute were considered and elected who should never have been permitted to cross the threshold of that Institute. It was known then, as it is well known now, that these two gentlemen—exemplary in all that goes to make up a gentleman, for aught we know—were old-school graduates not in practice at that time, if they ever were, but simply commercial agents for two large pharmaceutical companies in or near Detroit. What harm can these men do? They are out in the country working up trade for these old-school pharmaceutical companies, at so much per month or trade. They are not practicing physicians. They come to a physician and tempt him with their wares. In a moment it is discovered that the predestined victim is a homeopath. "Why, my dear doctor, I see you are a member of the American Institute of Homeopathy. I am a member also. You will find my name in the roster on page .035 of your most recent Transactions. Yes, our firm is a very liberal firm. We deal with homeopaths more than with any other," etc., etc. Are these men proper representatives of homeopathy? Ought they to be permitted to carry the American Institute of Homeopathy certificate about with them "for revenue only"? If we are going to be so super-righteous about letting in members of the homeopathic profession who do not genuflect in just precisely the way we think they should to Hahnemann or the Law of Similars, or to the Intercollegiate Committee, wouldn't it be a little more consistent to also keep out those who don't know beans about homeopathy; who never practiced it, and never intend to use it, except as a token and a pass into the confidence of the homeopathic physician in order to sell him a line of squirt-gun therapy remedies?

The late Lewis Crozier has bequeathed \$500,000 to build a homeopathic hospital, with a home for incurables attached, in Chester, Pa.—Geo. M. Gould, Browning, et al., please copy.

Book Reviews.

THE PIONEERS OF HOMEOPATHY. Compiled by THOMAS LINDSLEY BRADFORD, M. D., Author of "Homeopathic Bibliography of the United States," "Life and Letters of Hahnemann;" Senior of the American Institute of Homeopathy; Member of the Homeopathic Medical Society of Pennsylvania, Philadelphia County Homeopathic Society, and Librarian at Hahnemann Medical College of Philadelphia. Philadelphia: Boericke & Tafel. 1897.

Any work from the careful pen of Dr. Bradford is sure of acceptance by the profession and to be treasured as no other author's works are likely to be valued. Dr. Bradford seems to have made a life-study of Hahnemann and all that concerned that grand figure and his times. He has become possessed of documentary evidence bearing upon those subjects which, but for his indefatigability, would, in a few years, have been lost. The subjects, viewed from a purely commercial standpoint, would have deterred any busy man from engaging therein. For they contained nothing, apparently, but dry and musty details of no more than a passing interest to anyone save a few bibliophiles of the older profession. And yet, under the magic touch of the Homeopathic Herodotus, the Histories which he has evoked from these apparently musty and moldy parchments have become lessons of interest with which every homeopathic reader is intimately associated, and therefore anxious to continue to the end. His "Life and Letters of Hahnemann" was one of these masterpieces; for it brought to the surface facts which had not been known to the profession of the present generation, and, therefore, served to clear up much of a skeptical nature that had found lodgment in the professional brain. The present work is a necessary outgrowth of the Hahnemannian History, since it deals with the men who stood by Hahnemann in all his earlier trials and later successes, and are, therefore, figures in the Homeopathic history which must always continue prominent and lovable.

There is something soothingly refreshing, or refreshingly soothing, in these pages of the Pioneers who stood by the Grand Old Man at a time, to be sure, when he was not yet an old man, but nevertheless beset by difficulties and dangers which would appall most ordinary men. It is still better to have it borne on one's busy brain occasionally that these earlier men were graduates of the first Universities of the Old World; versed in all the learning of their day; and necessarily competent to know whereof they spoke and with that in which they worked. So that the aforetime slander that homeopathy was

the creation of a visionary old man aided and abetted by a lot of old women of both sexes, ignorant and superstitious, falls to the ground. To read any of these earlier biographies of the Pioneers fails not of impressing the thoughtful reader of any and every modern school that there were giants in those days : that under like circumstances the present admirers of homeopathy, at least a great portion of them, would fall by the wayside, rather than suffer the current obloquy of being out of fashion, and inevitably adopt the lazier, and easier-practiced fad of the serum-therapy, and others. These earlier men, these giants of homeopathy, employed reason in their work. They did not fly to homeopathy because it was the fashion, or because the early homeopaths pulled more silver door-bells, or because the populace wanted sweet medicines and palatable medicament. These men took up the homeopathic trend from a conviction of its truth as certainly as the early Christians took up their martyrdom : for these earlier homeopaths, none of them, escaped a martyrdom as pronounced as the early Christians. To *die* for one's faith is a grand consummation ; the monument of courage is not moved for an instant : the martyr is unwavering in his belief of a certain reward in a few hours. But to *live* for your faith through years upon years of suffering and contumely—that, it seems to us, is as hard, if it be not more difficult of accomplishment than to die. Some of these Pioneers were the subjects of almost unimaginable trials and persecutions. It meant something to give up all the friends of one's youth, of school-days, of early manhood, of society, of professional life, of governmental aid—to engage in the new "religion"! And that is what these grand men did. They lived their faith. They lived down the sneers of their former comrades, and many of them lived long enough to see homeopathy taking deep root in the appreciation of the populace. Some of them ultimately enlisted the interest and enthusiasm of crowned heads, and so lightened the load a little which a ruling dynasty of old-school physicians was heaping upon them.

Another thought which comes to the writer of these lines, as he reads of the Grand Men who stood by the ship in its first storm, is that these practitioners were real homeopaths. They entered into the totality of symptoms as a basis upon which to prescribe the remedy with a zeal and a conviction which, we fear, have been very much obtunded in later years. They took up a patient's case as if it was really sent to them for conscientious application of a truth which to them seemed divine. And it is remarkable, indeed, to learn in how many bad cases life and health and comfort were restored to the despair-

ing and given-up-to-die. These great homeopaths were not content to give medicines upon a slipshod or shifting pathological diagnosis. They applied the law as few of us after-coming homeopaths have been able to apply it. They were not borne up by the popular plaudits of the current dailies and monthlies, when they had cured a case. They did not stand on the corners of the street and recite the wonders they had accomplished in some one or two complicated cases. Theirs not the current fashion of sending reprints from the favorite journal to all their patients and patrons reciting the wonderful work done! They were believers in as well as practitioners of the law. With them it was no namby-pamby affair, to be used if there was no seeming possibility of calling in a surgeon or a gynecologist. It is the more remarkable that these men, who, in very fact, studied their cases with a care and a conscience which seem long since to have gone out of fashion, should have clung so closely to the single remedy and the *high-potency*! Are we not to infer from this that these earlier men, who gave up competence, and social environments, to which their education and former lives entitled and had surrounded them—are we not to infer that they were sincere and that they had no wish to foist a ridiculous fad upon their professional descendants? Is it not more to the point to assume that these well-educated men had studied deeply and proved the homeopathic theory to be correct ; and that we, of the later generations, have fallen away from the true religion, by reason first of improper translation of the tables of the law ; and later by the rush and hurry of the present generation, as well as the crowding of the medical student's brain with so many, many *facts* which are absolutely worthless to him in his practical life! These men did not go to some homeopathic college for their first draught of homeopathy. They had no opportunity to grease the buggy-wheels and do hard collections for their homeopathic preceptor in order the better to understand the alternation of homeopathic remedies, the use of combination tablets, the injection of serum-therapy, or the cutting out or pulling off of pathological products, as is so much the vogue to-day. They had to build from the ground up, and every step was marked by toil and trouble, midnight oil, and deep, deep study.

The air of deep seriousness which pervades the work of these primitive homeopaths was one of the charms of the labors of the last international Homeopathic Congress held at London. Every paper brought before that august body had been well prepared, presented with a purpose, and well defended. There did not anywhere, certainly not in any of the papers which

it was our pleasure to listen to, appear evidence of that unseemly haste and slipshodness which has disfigured so many a journal as well as the Transactions of many a homeopathic society. The men who took part in that International Homeopathic Congress were versed not only in homeopathy, but as well in the medicines of the other school. No trivial statement was indulged in; the most weighty of arguments were presented. For a time we believed this to be an unfortunate condition; but closer attention to the manner in which our English brethren went at the subject made conviction sure that they were speaking of something they knew. We in this country and in this age, since the advent and the professed greater knowledge of surgeons, have measurably fallen away from the basic idea of medicine—the cure by mild measures, and the substitution, therefore, in so many instances, of the knife. In the olden time the knife was the last thought. But to-day, after examining many of our medical colleges, it is but too true that medicine as a first thought has given way to surgery. Scan the chairs in the average faculty of to-day and mark the predominance of the surgical idea. If it were true that the use of the knife had improved the condition of the race, then the inevitable would follow—the loss and dispersing of the medical teachers and practitioners and the absolute replacing thereof by surgery. Surgery has unquestionably opened up parts of the body and done brilliant operations, and will continue to add to its laurels as the days go by. Does this, however, prove that surgery is all there is to a medical life? Does it prove that the human race is really the gainer by the discovery of antiseptics? Will the day ever dawn in which medicine can be laid aside and surgery take its place? No! It is true that among the common people there is something intensely fascinating about the mechanical branch of our work. And yet every honest, reading surgeon knows that medicine as an art will outlive every form of surgery. He knows that even to-day there are less operations done comparatively than there were five years ago. He knows that the filling of the profession with large annual classes of embryo-surgeons has let loose the very seeds of that dissolution which will in time destroy the pre-eminence of the surgical profession. The older men who have gone into surgery carefully, like the pioneers of homeopathy, are conservative and do not obtrude the surgical idea on every occasion. They do not rush at every stomach-ache as an appendicitis, or an ovarian inflammation as a necessary field for a immediate brilliant operation. The younger men, like the younger homeopaths who have not had to blaze their way through the forest of difficulties, rush in and

seize upon every opportunity to air their skepticism of drugs and the dominance of surgery. When we look through the French and German and English medical journals we are at once arrested by the absence of surgical cases. Are we to infer that these countries have no skilled surgeons and gynecologists? We think not. The proper inference is that these men of the other countries are more disposed to give their patients the benefit of the milder means, and only, as a last resort, to resort to surgery.

In studying the manner of work of the Pioneers of Homeopathy we find that deep conscientiousness, that taking of necessary time for the giving of medicine and the further taking of time to watch the effects of that medicine, which is something with which the American doctor as a rule is not acquainted. But did not these earlier doctors make notable cures by their slow and conscientious process? Is it possible to believe that homeopathy could have stood to this day if these pioneers had adopted every progressive (?) device of the other school, or of ambitious time-serving and money-making homeopathic pharmacies of their day? Would a combination-tablets-homeopathy, or an alternating-homeopathy, or a drug-pathogenetic-homeopathy have kept these homeopathic giants in existence during their lifetimes, and afterwards in the bead-roll of Immortals? And one final apostrophe. Would these Pioneers have made better cures than they did, could they have known and used the bacteriological theory, or the serum-therapy in all its varied forms? Has homeopathy changed since they administered it in its pristine purity under the eye and guidance of the Founder thereof? Perhaps, after all, it is not to be wondered that there has arisen in our schools a class of honest-doubters who are trying to purify the Augean stables of its accumulated rubbish. Only they have begun wrongly. It is not Hahnemann's *Materia Medica* that is wrong—these Pioneers disproved that slander by their works, else Homeopathy would long since have perished off the face of the earth—but the teaching and the practical application thereof. There all the trouble lies.

This book, its publishers tell us, is not published to make money for either the painstaking historian or the publishers. It is a logical necessity of the school. It ought, therefore, to be purchased by each homeopath whatever his shade of homeopathy may be, as a history of his family-tree; and one to which he may most proudly refer; or on occasion submit to the scandalizing old-school doctor, or to the flippant homeopathy-for-revenue doctor of to-day. The book gives the name and history of every known homeopath who figures in its history up to a certain time. It is, therefore, a perennial source of

information for every well-informed doctor. Dr. Bradford ought to be made to feel that he has done a work for the profession which will immortalize him. Our text-books will be superseded by other text-books in the course of time : but this, his latest book, will remain a classic to the end of homeopathic time. We have not been able to detect one inaccuracy so far, either in the editorial part or in the printing part. We express the wish that every homeopath, who has any love for his profession, get this book and read over occasionally the history of the immediate associates of Hahnemann; we believe he will rise from his desultory reading a better homeopath and more than ever proud of those heroes who made it possible for us, of this day, to practice the Law of Similia with fair and ever increasing tolerance and approbation.

ANNOUNCEMENT OF NEW BOOKS.

The following books are in press and will soon be issued by the publishers, J. B. Flint & Co., 104 Fulton Street, New York.

FLINT'S ENCYCLOPEDIA OF MEDICINE AND SURGERY. Second (1893) edition, 1555 pages, revised with the assistance of fifty-six contributors and thoroughly in line with recent advances in medical science. Cloth, \$5; Leather or Half Morocco, \$6.

HARTLEY-AUVARD SYSTEM OF OBSTETRICS. Third (1898) edition, 436 pages, 543 illustrations. Revised by Dr. John D. Hartley.

This work is essentially Auvard, and embodies the author's personal experience, the text is clearly pictured by hundreds of original drawings to be found in no other book. Cloth, \$4; Leather or Half Morocco, \$5.

POZZI SYSTEM OF GYNÆCOLOGY. Third edition. Revised by Dr. John D. Hartley.

Globules.

Said an eminent homeopathic physician in a letter to the editor: If you want a motto for the "Cyclopedia of Drug Pathogenesis" and its *Index*, here it is: "Hughes-ful but useless!"

Dr. J. L. Hadley has located at Oil City, Pa., and is confident of success. If sterling worth and faithful attention to business are elements of success, then we are equally confident of his success.

"Talking about calendars" says an Omaha physician in a private communication, "the one sent out recently by the Tongaline Co. irritated me also. I got even by taking a sharp knife and cutting out the square in the center, containing the calendar and all Tongaline matter, and inserting in the space a large cabinet picture of Hahnemann; and, lo! he shines forth the greatest sun of all, framed in by such an array of lesser lights as Hunter, Billroth, Loomis, Playfair, etc. Did I play-fair?"

Any homeopathic physician who is desirous of educating his children, and at the same time making a good living, can learn of a splendid opportunity by addressing M. P. Hayward, M. D., Oberlin, O.

Any physician having a valuable and tested formula or remedy, for the introduction of which to the profession he desires to arrange with a manufacturing pharmacist, may address with particulars XX, care the New York *Lancet*, 104 Fulton St., N. Y.

Another cottage has been added at Dr. Givens' sanitarium for nervous and mental diseases at Stamford, Conn. This sanitarium is open all the year round and provides home comforts with the special care required for each patient. Write to Dr. A. J. Givens for any information desired.

Two cases, illustrating extreme types of vertical head pain, shown in Dr. Spiller's Philadelphia clinic recently, are communicated by Dr. Witmer. In one of the patients the dull headache at the vertex was relieved by pressure; in the other patient the headache was aggravated by pressure. The first was a case of symptomatic anæmia, or cerebral anæmia, as the affection has been wrongly called; the other, a case of neurasthenia, due to overwork. Attention was called to the fact that while these patients had head pain similar in position and similar in degree, the causative factor was extremely dissimilar and called for different treatment.

In a recent lecture,⁵ Dr. Davis called the attention of his class to the various injuries to the female birth-canal, which may be produced by a horizontal line of traction on a pair of forceps during delivery. When the fetal head is above the pelvic floor, traction should invariably be made in a line downward toward the obstetrician's feet. This can best be accomplished by some sort of axis traction-apparatus attached to the forceps blades. When the head is at the vulva, the handles of the forceps should be raised over the pubes so as to draw the head away from the perineum, at the same time taking care that the anterior vaginal wall is not lacerated.

In speaking of muscular anomalies, Dr. Hantsell of the Philadelphia *Polyclinic* stated that his recent experience has led him to believe that well-marked insufficiency of the internal recti—exophoria or exotropia—in adults, may be one of the earliest symptoms of locomotor ataxia, and urged the students in a case of this character to thoroughly investigate the condition of the nervous system and to be chary of advising operative treatment. Operations can have only the effect of changing the mechanical relations of the muscles to the ball, whereas, if the disease is one

of the central nervous system, and the symptom one of deficient innervation, a permanent good result is not possible to be obtained by tenotomy or advancement.

Early last summer, in the treatment of several cases of gastro-enteric catarrh, and later, in a large number of cases of cholera infantum and entero-colitis, Dr. Edwin A. Robinson employed "Eskay's Albumenized Food" exclusively. He says:

"My reason for using this special preparation in preference to others was that the results obtained were so uniformly satisfactory that I was compelled to believe that an almost perfect substitute for mother's milk has been found."

Miss R., nineteen years of age, brunette, well-developed, but troubled with dysmenorrhea, called at my office, says Dr. E. L. H. Barry, Jr., Jerseyville, Ill., and after explaining her affliction said, "Doctor, if there is anything you can prescribe to relieve my suffering do so, for life is a burden to me now." I gave **ALETIS CORDIAL** at once, directing her to take a teaspoonful three times a day, commencing four or five days before the regular period. Several weeks afterwards she returned, saying, "I've come back for more of that medicine, for it's the only thing I ever had to give me relief."

John Keith of Mt. Washington, Mo., makes confession in *The Big Four*, of his long ill treatment by the allopathic profession, the intent of his well-written confession being to show the undoubted superexcellence of the homeopathic method; but he winds up the confession by stating that his trouble was a surgical one and was so treated by a homeopathic surgeon and cured. Well, the intent was good. Sorry a good friend of ours is mixed up in this five-dollar-a-month style of literary architecture. But it is wholly impossible to be saved from the attentions of one's fool friends.

Made in America.—The supplementary collective investigation of the American Pediatric Society, which embraced more than seventeen hundred cases of unmistakable laryngeal diphtheria, showed conclusively that the antitoxin which is now most generally employed and which yields the highest rate of recoveries is a domestic product: Mulford's Concentrated Diphtheria Antitoxin. The report retained seventeen hundred and four cases, of which forty per cent. had been treated with Mulford's.

In the cases so treated the mortality was about one-third less than in the cases treated with all the other antitoxins combined. Physicians who are not already familiar with this product should not fail to write for full particulars and recent brochure to H. K. Mulford Company.

Infected wounds are best treated with moist dressing. Finely powdered acetanilid, with five per cent. of aristol added, makes a most satisfactory dressing powder for wounds.

A member of the medical profession, Dr. A. W. Nelson of New London, Conn., has invented and patented a policeman's club which he calls by this name. Somebody else has called it the "kings of clubs." It is coated with semivulcanized rubber, which is sufficiently yielding, it is said, to prevent a blow with the club from inflicting serious injury, while not detracting from the effectiveness of the weapon. This certainly seems plausible.—*Atlantic Med. Weekly*.

The present high mortality among bottle-fed babies shows how imperfectly commercial substitute foods heretofore offered to the medical profession approach the natural food of the infant. This is because all have been manufactured with more faithfulness to the chemical composition of mother's milk than to the physiological character of its components.

Human milk is an animal food, and the importance of animal proteid matter and fat in a substitute food therefore cannot be overlooked. The only food which presents these ingredients in this form, and at the same time combines with it the nourishing properties of cereals, is Eskay's Albumenized Food, which is suited to a greater number of cases of both infants and invalids than anything heretofore presented to the medical profession.

The interest which connoisseurs, as well as laymen, take in all the facts pertaining to champagne is increasing from year to year, and it may be assumed to be generally known that last year's total importation aggregated 215,519 cases, which means a falling off, as compared with 1896, of 7770 cases, and naturally most of the brands have suffered in consequence. It is therefore so much more remarkable that one brand has not only held its own, but shows an increase over 1896, having imported 72,775 cases, which is equal to one-third of the entire champagne importation, exceeding every other brand by 42,292 cases. Physicians of international reputation have pronounced G. H. Mumm's Extra Dry to be the most wholesome champagne, containing less alcohol than the champagnes of any other known brand and, as a stimulant of the sick-room must be pure, it is only natural that the demand for this brand is steadily increasing in that direction.

WIT AND WISDOM (a new department) see page X.

The American Homeopathist.

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NEW YORK, MARCH 1, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



OWEN C. EVANS, M. D.,
Anaconda, Mont.

REGULATING MARRIAGES.

ONE of the Ohio Solons, in legislature assembled, has chaperoned a bill providing for the appointment, in each county of the State, of three physicians whose duty it shall be to examine all applicants for marriage, and by a rigorous physical examination of their minds and persons, determine if they are competent to enter the married condition; and if these appointed physicians fail to pass the applicant,

then marriage as to him or her shall be forbidden, until such time, if a curable disorder, when such disorder shall be cured, or not at all.

* *

THIS would be, manifestly, a good thing for the doctors, and we marvel that our law-making State of the East, New York, did not devise the measure, and thus keep a few more of its resident physicians from becoming motorists and conductors on street cars.

* *

GREAT is the law-maker! As we intimated in a recent Book-Review notice, if the American legislator would devise a few ways of encouraging maternity among its married women, and so remove the present danger of becoming extinct as a distinct American race, he would be entitled to the lasting credit and applause of the lovers of the United States and its institutions. But with KAREZZA counseling—certainly by indirection—the limitation of family in the very class who could and should have progeny; with the daily augmenting knowledge of the race along the line of non-impregnation, as well as the steadily increasing dislike for children in the newly wedded, we are in a fair way of leaving our country—not only in the rampant politics—but also in its more important field of continuing the race—in the hands of aliens, who have not, and may never have, the American's love for his country.

* *

IF, finally some sapient Solon would inaugurate a system of restriction among the physically incompetent, the utterly debased and criminal, the extreme lower classes, the "assisted" of every country, then some good might be done the country. But to subject everyone, high or low, to the Inquisition of three county doctors, would

make the law ridiculous; would tend to discourage marriage, with the inevitable European corollary of winked-at-marriages out of law, and a constantly increasing population of illegitimates for whom the State must care. So that the end is the same in either case. In Europe this is not so bad a feature since the army must have *Kanonen-futter*, and the quality of blood or legitimacy does not enter into the problem, except in the official order. But in America, where the civilian is the country, and not the military, the proper remedy, as in the matter of intemperance, lies in *education*!

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TEACH the youth, as is already being done in many of the public schools, the danger of wrong-living as well as wrong-doing, and in good time the great blot of constitutional disease will become less and less and a better heredity transmitted. But restrictive laws before marriage; the teaching of "legitimate" ways of limiting the family among those who are ordinarily able to have and support a family; and the asexualization of criminals tend to naught. The animal instinct will break through the most cunningly constructed legislation. The Curse of the Age is Too Much Legislation!

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Glonoine IN CHRONIC PALPITATION.—Dr. Ord. —Miss H., æt. twenty-six. Since severe influenza two years before had suffered from constant distressing palpitation of heart. Two months ago she had slight influenza, but made a rapid recovery in every way except for the palpitation, which became worse. She is naturally active and cheerful, fond of tennis and exercise. Her pulse is always 120, heartbeats diffuse and tumultuous, visible throbbing of carotids, but the sounds are clear and there is no murmur. The thyroid is not enlarged. Periods regular, but scanty. Walking slowly does not increase palpitation, but singing, any exertion, any emotional disturbance, even going to church, or a hearty

meal, bring on violent beating. Secret of symptoms was minutely investigated. This showed that the violent attacks usually commenced with heat and flushing of face, with increasing throbbing in the left side of chest, which makes her feel nervous and apprehensive; then there is feeling of indigestion and discomfort in the stomach, with trembling all over and distress if she moves. After sitting quiet for a time this generally passes off.

The sequence indicating glonoine, which agreed with the symptoms, pilules of the 6x dilution were given, sufficient for a month, as the patient was leaving Bournemouth. In four weeks she wrote to say she had finished the pilules and was now very much better; she hardly ever felt her heart, was playing tennis, singing, and taking long walks, and had not felt so well for many months.

Belladonna IN FEVER AND DELIRIUM.⁴⁰—September 13, at 4 P. M., I discovered my daughter, aged four, with a light fever. It increased during the night, bowels running off, and at 7 A. M. fever 104½°, delirious, picking the bed-clothes and grasping at objects in the air, pupils dilated, and a wild look; throbbing carotids, and occasionally crying as though she was frightened at something. We were very much alarmed, and wired for a homeopathic physician, but could not get one. Feeling that I must give relief, I began at once on bell. every twenty minutes until about 10 A. M., when improvement began, then every hour. At two o'clock she seemed conscious, and asked for something to eat; temperature then 103°. After eating, bowels moved, and she went to sleep, and at 10 P. M. had no fever, and has had no indication of return. Is up and looks as well as ever. I told an allopathic physician of the case, and he said he would never have risked bell. if it had been his child.

Silicea IN FEVER CASES.—Dr. C. S. Kali, L. M. S., Calcutta.⁴—Mr. M. N. Dey, aged thirty-five years; robust, well-built constitution; short stature, abdomen tumified; has had fever two days; there was intermission. Paroxysm used to come from 8 to 10 A. M. There was a severe chill. During the chill I noticed "icy coldness of the feet and legs as far as the knees." Heat was excessive, with profuse perspiration all

over the body. He used to drink water in the hot stage. The above symptoms underlined were my only strong guide to select *silicea*, and its 30th potency I gave; for two days improvement took place, but in a very slight way, which gave me no such satisfaction as we expect from our homeopathic drugs. I was in a puzzle to think whether potency should be changed or new remedy should be invoked. But on seeing slight improvement as regards the intensity of the paroxysm, I intended to change the potency, but then in my box the higher potency was wanting, so I gave *silicea* 3d trituration every three hours, which did wonders. This day the attack was very slight, and the next day there was no fever at all, and the trituration was given only thrice a day, by which the patient felt all right within a couple of days.

Remarks : (1) In my life I never used *silicea* on 3d potency in any disease, because my idea is that the drugs of inert nature, such as *silicea*, sulphur, *carbo. veg.*, *calcareea*, cannot acquire a proper power below the 30th potency. It lays open a problem in my long-searching potency questions.

(2) The symptom "icy coldness of the feet and legs as far as the knees" during the chill stage of *silicea* in Dr. H. C. Allen's excellent Fever Treatise being made most prominent by letter, of antique face, gave me full hope to stick to this drug only, and the symptom in question was so very distinctly marked in the patient that I did not think it advisable to change.

GRINDELIA ROBUSTA IN ASTHMA.

By HERBERT W. FOSTER, M. D.

PATIENT, man nearly seventy years old, subject to asthmatic attacks in which he would awaken suddenly in the night, the room seeming "too small" for him—and gasp and struggle for breath. In a few minutes he would get a little quieter, and just as he would commence to lose himself again in sleep, would suddenly awaken, frightened and gasping, because he seemed to have forgotten to breathe, and would usually spend the remainder of the night sitting up, in order not to forget to breathe and repeat the experience indefinitely. He would dread to retire the next night on account of fear of the

same experience. *Grindelia rob.* 30 dil. relieved him *at once*. He now always keeps a few of the powders on hand, one of which always gives him immediate relief, and insures a good night's rest.

MONTCLAIR, N. J.

A DIGEST OF TEN YEARS' WORK AT A CHILDREN'S SANITORIUM.*

By WM. M. STORRAR, M. D.

Scrofula.

The remedy which I find myself prescribing most often, the one to which I think the condition of scrofulous children most frequently points, is *calcareea phos.* The children are generally somewhat thin or flabby, and dirty-colored, with enlarged glands about the neck and elsewhere, and with enlarged tonsils, and often a laxness of the abdominal walls amounting to tubbiness. *Calcareea carb.* often answers very well where there is marked fatness with the flabbiness, but *calcareea phos.* for nearly all the manifestations of the diathesis is the remedy which, after generous diet and general hygiene, I have most confidence in. The 3x or 6x attenuations are the preparations I generally employ.

Follicular Tonsilitis.

Frequently we have little outbreaks of follicular tonsilitis, to which, moreover, the nurses are particularly susceptible, the effect, I firmly believe, of their being too much or too long in the atmosphere of the sick, on which account I particularly insist that the nurses should spend as much of their off-duty time out of doors as possible. Some years ago these cases were constantly giving us a lot of trouble in spite of the best modern sanitary arrangements in the building; but since for this complaint I have taken to use Schüssler's *kali mur.* 3x or 6x, we have had next to no trouble whatever. This is a remedy which with me ranks as practically a specific in follicular tonsilitis, or hospital sore throat, and those cases, which if not checked early, very often run into acute tonsilitis. In about three days these throat cases are generally quite well.

Tabes Mesenterica.

For *tabes mesenterica*, of which we have a large number of serious cases every year, my

* From the *Journal of the British Homeopathic Society*.

usual treatment is first of all careful feeding—generally milk only, then calcarea phos. 6x, twice or three times a day, and a hydropathic compress worn constantly round the abdomen, changed three or four times in the twenty-four hours. Often I prescribe a weak solution of natrum mur. in the compress. This compress consists of one fold of very damp, not wet, linen round the abdomen, covered over with a piece of oiled silk or red jaconet, or other waterproof sheeting. This sort of compress keeps damp a very long time. I refer to this particularly because later on I shall have to refer to another kind of compress or pack. Where diarrhea is a prominent feature, as it often is in these cases, I generally find acid phos. dil. meets the contingency very well. In any case, it very rarely happens that we do not send out these cases practically cured, although it may take six weeks to do it.

Adenitis.

As a matter of course we have a great number of cases of adenitis, most frequently about the neck. Under calcarea phos., with the improvement in the general health, some measure of subsidence is frequently achieved. In the early stages where there is only some swelling and tenderness of the glands, with no central necrosis of the gland substance, kali mur. has answered admirably. Somewhat later, when the gland tissue is still intact, silica has often started a disposition to subsidence of swelling which has gone on then to reduction to almost normal.

But where the swellings are large, and the centers of the glands caseous or purulent, I don't think our remedies touch the spot at all. It may be well to leave them alone sometimes, but when, as most frequently happens with these cachetic children, suppuration sets in and danger of bursting is imminent, I am strongly of opinion that surgical measures cannot too speedily be resorted to. A favorite method with me is the metallic seton, *i. e.*, a piece of wire threaded through the abscess and left *in situ* for a few days until it has discharged itself.

If this plan is resorted to early enough, before the skin has become adherent by inflammation to the capsule of the gland, no mark or pucker is left behind, a great improvement upon the

usual plan of waiting until, if not opened, the abscess will burst of itself, continue discharging for an indefinite period, and certainly leave an ugly and indelible scar to advertise forever the scrofulous habit of the individual.

Hip Cases.

We get, too, an enormous lot of hip cases, sometimes in the quiescent stage, often with lots of sinuses. I must say these cases are very well treated by our surgeons nowadays. The Thomas splint was the invention of a genius. This splint answers every possible way of securing rest to the diseased joint, and I am certain cures absolutely cases got hold of early enough. Here calcarea phos., silica, and calcarea sulph. are the remedies I most frequently employ. Calcarea sulph., another of Schüssler's remedies, I find very efficacious in diminishing purulent discharge and ultimately drying it up. It seems to answer better, to penetrate somewhat more deeply than hepar sulph., which is its nearest analogue.

Empyema.

In cases of empyema—I see we had nineteen last year—I recommend the nurse to use a dilute solution of calcarea sulph. as a lotion for flushing out the pleura. This solution has always proved useful, so much so, that we very rarely send away a case of empyema not quite cured. Of course I administer calcarea sulph. internally at the same time.

Chorea.

We get annually a great number of cases of chorea—fifty-two last year—and I must say we are uniformly successful in their treatment. I don't recollect one case which has not improved so much as to be sent out in six weeks practically cured. One girl I recollect was so violent that she had to be held down in bed for two days—she was frightfully emaciated, covered with bed sores, and generally speaking a deplorable sight, and for three weeks could not feed herself, yet she made a very good recovery. My usual prescription is agaricus mus. 6x, once a day, and alternate hot (95°) and cold (80°) sponging, with some friction, to the spine night and morning, or more frequently if the symptoms are very urgent.

Deformed Limbs.

I wonder if you have the same feeling I have about many of the cases we so often see and hear of nowadays, since McEwen of Glasgow began resecting deformed limbs. We have frequently of late had cases of young rickety children sent in with their legs in plaster casings after having been broken: of course the bones unite in the new positions perfectly—but with enormous callus. I should very much like an opinion about the propriety of fracturing the limbs of children below adult age. I have the impression that to fracture the limbs of children before eight or twelve years of age, *i. e.*, in order to set them straight, is not only a brutal but an unnecessary procedure. Could not these limbs be equally improved by rest in bed under the best hygienic surroundings, and with splints and extensions? Or is it that hospitals cannot spare beds and surgeons are in a hurry?

Hydropathic Pack.

I would like to draw attention to the hydropathic pack as a most valuable adjunct to our *medical* treatment of disease. The pack consists simply of a piece of linen or a sheet sufficiently large to encircle the body—what is called the half-pack is a piece large enough only to encircle the trunk. This sheet must not be very wet—it should be well wrung out,—the reason for this being that the finely divided water of a damp sheet is more efficacious in carrying off superfluous heat quickly by evaporation than a wet one would be. And it is not essential that the pack should be wrung out of cold water—quite otherwise, no good purpose is secured by that at all, for not only may the patient be shocked and the congestion be driven inward instead of attracted outward, but the susceptibilities of all anxious onlookers are also saved from shock. The one single indication for the pack is pyrexia. I never hesitate to put it on if the temperature runs up quickly to about 103° or 104° , no matter from what cause. I have yet to learn what acute fever may not speedily be relieved by it. Take the case of a big girl of fifteen, attacked, from an excoriated nostril, with erysipelas of the face and scalp. Her temperature ran up quickly one morning to over 105° , she became delirious

and wild. Aconite and belladonna would immediately suggest themselves here, but when called in, at 9 P. M., I immediately had her wrapped up in a large sheet well wrung out of water at 95° . In this case the sheet was renewed every two hours, or sooner if it became dry; or to save movement and disturbance of the patient, it was simply sponged over with a very damp, not too full, sponge. In this case the temperature in three hours came down to 101° —next morning it was 99.8° —no higher at night, and the next day after it was normal.

Or take another case, seen with me in September by Dr. Nicholson of Clifton, who was visiting in Southport at the time. This boy, seven years old, came in with a little cough, convalescent from pleuro-pneumonia; he had been getting on very well, but one afternoon his temperature ran up to 104° , with very labored breathing, and a very high pulse and general look of collapse. There were no physical signs on examination of the chest, but all the symptoms pointed to acute pneumonia. A half-pack was immediately put on, and renewed as soon as dry, till the temperature came down to 101° , which it did in three hours; then it was discontinued. The next morning his temperature was 101° , and in the evening 99° , and the next day quite normal. The next day after he was allowed up, and seemed little the worse for his narrow escape.

Both these cases in the ordinary course of events were bound to die, and that quickly. Our homeopathic remedies, valuable as we all know them to be, are not, in my opinion, quick enough in their action to cope with these cases in time; and it is time that is the most important factor, for I believe that pyrexia, *i. e.*, the vital reaction, is often a great deal more dangerous to life than the original exciting cause, be it pneumonia, erysipelas, or the acute exanthemata.

Help the struggling system to throw off its exuberant caloric, and then probably the exciting cause will prove less formidable than at the onset it seemed.

I find for this last ten years that the mortality in the institution is only about 2.5 every year, while all but 3 per cent. (who are sent home “no better”) get quite well, or are more or less considerably improved.

CLINICAL REPERTORY AFTER DR. CIGLIANO'S PLAN.

By DR. EDWARD FORNIAS.

(Continued from page 75, October, 1905)

EMPTINESS. 1. *Cocc., crot-t., mur-ac., sars., sep.* 2. ant-c., arg-n., arn., arum., calc-ph., cham., cina., coloc., dig., dulc., eupho., fluor-ac., guaj., gum-g., hep., k-carb., kobalt., lach., merc., mez., oleand., petr., phos., puls., squil., senecz., stann., verat.

Pr. breakfast : sars.
dinner : nat-ph., zinc.
eating : nat-ph., stann.
emission of flatus : phos.
stool : apoc-c., carb-v., jabor., *pow.*, *sep.* — *diarrheic : coloc. — *soft : sulph-ac.

Ql. circumscribed — *epigastrium : k-bich., oleand.; has to take food at night : ign. — *hypogastrium : coloc. — *umbilicus, > bandaging and eating : fluor-ac. — *around umbilicus : calc-ph. — *L. S. : sep. — *bowels : verat.; going off after a meal : ant-c.
compelling to lie down, with great weakness : phos. — *to take food at night, in *epig.* : ign.
unpleasant : crot-t.

Sm. as after much smoking, — after sleep : phos.

Md. moving : sep.

Cn. hollowness : cocc.
hunger : crot-t., stann.
rumbling : petr., sars.
shooting : phos.
sinking feeling : calc-ph.
weakness : phos.

Agg. walking : carb-v.

Am. eating : ant-c.; after dinner : dios.
pressure : caust., naja.
after sleep : phos.
stool : mur-ac.

Cs. fasting, A. M. : staph.

Tm. morning : mez.; after rising : mag-c.; after stool : mur-ac.
noon : dios.; before dinner : nux-v.

ENLARGEMENT. 1. Corpulency.

ERUPTION. 1. *nat-c.* 2. bell., bryo., merc., nat-m., sulph.

Ql. burning : ars., rhus.
eczema umbilicale and inguinale : am-c., calc., graph., led., merc., sep., sulph.
eczematous : arn.
elevated : merc.
erysipelatosus : graph.
herpes zoster : graph., rhus, thuj.
herpetic : in groins : graph.
itching : agar., merc., rhus, sulph.
miliary : manci.
moist : merc. — *when scratched, scabby, yellow, itching spots : k-carb.
pustular : puls.
red : merc.; fine : merc-j. f.
ringworm : tellur.
scabby, yellow, itching spots, moist when scratched : k-carb.
scarlet : anac., bell.
sore : merc.
vesicular : caust., merc.
Sm. itchlike : merc.
rashlike : ars.
scurf-like : baryt-m.

EXCORIATION (sensation of). 1. *Ars., arn., bell., nux-v.* 2. asar., calc., colch., coloc., coni., crot-t., hyos., ipec., phos., rata., stann., sulph. 3. **Soreness and Pains.**

Ql. circumscribed — *lower abd., with sick feeling : opii., — *epigastrium : mang. — *hypogastrium : alum., am-c., ran-b., sulph.; right : calc., sabad. — *inguina : nux-v. — *integuments : ambr., bell., hyos., meny. — *hepatic region : acon., am-c., carb-an., lyc., raph. — *sides : arn.; L. S. : colch., hep.; R. S. : gins. — *spleen : asar., ran.

Md. strong pressure : coloc.

FERMENTATION. 1. *Carb-v., elet., gran., hep., lyc., mag-m.* 2. agar., ambr., ang., arn., calc., carb-an., coff., coni., diad., hell., mur-ac., nat-m., phos., rhus, seneg., stram.

Pr. eating : nat-s.; fruit : cinch., ars., bryo., puls.

Ql. circumscribed — *lower abd. : canth., coni. — *epigastrium : anac., croc. — *about navel. — *side : am-m.

Sm. as if boiling, during menses : lachn.

Md. during and after **stool** : mez.; **diarrheic** : sars.

Cn. **colic** and discharge of **flatus** : lyc.
discharge of offensive **flatus** : sars.
diarrhea : bryo.
empty **eructations** : phos.

Am. after **eating** : rhus.

Tm. **forenoon** : cast-eq.

Sb. **stool** : sulph.; **diarrheic** : gran.
vomiting : coff.

FLACCIDITY (flabbiness). 1. *Am-m.*, borax, opi., phos. 2. *amyg.*, *croc.*, *lob.*, *plat.*, *podo.*, *sep.*, *sum.*, *zinc.*—*after **stool** : *mag-m.*—*from **atony** : *staph.*—*after **child-bearing** : *iod.*, *nat-c.*, *sep.*

(To be continued.)

A PLEA FOR A WESTERN PILGRIMAGE.

By D. A. FOOTE, M. D.,

Chairman Sub-committee Press and Correspondence, Local Committee of Arrangements.

THE Local Committee of Arrangements for the Omaha meeting of the American Institute are very much encouraged in their prospects of making at least two records in the history of the Institute. First, as to attendance, and second, as to new members. The inquiries as to what we are doing in Omaha are so numerous as to indicate that the interest in our next meeting is beyond that shown for many years. This is, of course, especially true of the West, but is also equally gratifying from all over the East. The plans for a most thorough canvass for new members throughout the States west of the Mississippi River are being carefully laid and a surprise is in store for our beloved Institute. There will soon be ready an official report in detail by the Executive Committee.

Omaha is to be the National Convention City this year. Over sixty National and Sectional meetings are already arranged. We wish to assure visitors that hotel accommodations are ample and satisfactory, but engagements for rooms we urge be made early through our sub-committee for hotels. Our meeting occurring the last week in June, booking for rooms should be made early in May at least.

The railway facilities for reaching Omaha are unexcelled. Fourteen lines of railway converge at Omaha from all directions. The train service between Chicago and Omaha in point of elegance of equipment is equal to that between Chicago and New York, so nothing more need be said, as that is the finest in the world.

While here in attendance of the Institute ses-

sions, nothing will be allowed to interfere with the regular programme of the meeting, but to him who desires recreation and entertainment, most ample facilities will be provided. If the visitor wishes to see something large, he will be shown an ore smelter which turns out more gold and silver than any other refinery in the world. Omaha's parks, public buildings, art galleries, libraries, etc., must not be overlooked in the dazzling magnificence of the Great Trans-Mississippi and International Exposition, which begins June 1, for a five months' exhibition. The plan of this exposition is modeled after the World's Fair, and its architectural beauty will recall vividly the magnificence of Chicago's famous Court of Honor. A booklet giving some idea of this Great Fair will be mailed to each member of the Institute and to all others upon application.

A word to tourists. Omaha is the gate to a realm of sublime scenery and unrivaled wealth. From this Gate City radiate a half-dozen great railway trunk-lines, through Nebraska, the greatest corn-producing State in our country, and with its great stock industries and beet-sugar factories and varied farming products, fast becoming the richest of the Western States.

Beyond are the Alps of America, snow-capped, ice-mantled, with silent, eternal, congealed rivers projecting into the valleys as mighty glaciers; mountains of gold and silver; gardens of the gods; springs; veritable fountains of youth, and scenery of unrivaled grandeur. To the northwest are the Black Hills with their golden treasures; the world-renowned Homestake mines; the Hot Springs with the famous hot plunge-bath; the wonderful wind-cave with ninety-six miles of subterranean depths already explored; fishing, scenery, hotels, transportation facilities all that can be desired. Two trunk-lines compete for travel here.

Many of our visitors will wish to visit Yellowstone Park, a most delightful trip into a veritable wonderland which has no prototype; incomparable in Nature's domains, a veritable museum of scenic freaks and beauty, with its geysers, lakes, cañons, springs, cataracts, weird petrifications, and game preserves of, elsewhere, all but extinct American wild animals. Colorado needs no mention. You will hear of the attractions of that wonderful State from Denver. Wyoming, Montana, Utah, Idaho, all have their special features for the tourist.

All this wealth of scenery and inspiring grandeur is within the reach of the most modest and most economical of Institute members. Excursions will be made through the great Rocky Mountains, extending through points of interest from the Black Hills to Colorado and Utah, Yellowstone Park, etc. The season will be delightful for such excursions, and our visiting

doctors and their friends will get so full of mountain ozone and patriotic enthusiasm that they will be carried many years beyond the three-score and ten allotted to man.

Friends, doctors, countrymen, begin early to plan for this trip to Omaha. Enjoy the great meeting of our National Medical Society. Educate yourselves by attending the brilliant exhibition, an artistic object lesson of the resources of your country, the Trans-Mississippi and International Exposition, in which millions of dollars are being expended judiciously to present worthily to your view the splendid products of American industry.

Broaden your knowledge, your lungs, and your hum-drum experience by visiting the wonderland of your native country, the envy of all lands, the great Rocky Mountains with their primeval glories. Do this, and believe me, when you shall have returned to your several homes, there will come daily into your life with its weary rounds, a bright troop of blessed memories and splendid visions. When you turn your eyes toward the setting sun, your heart will prompt you to bless the friends who urged your pilgrimage hither, and you will find your love and admiration cemented eternally to the Great West, *Your West, Your Country.*

APPLES OF GOLD IN PICTURES OF SILVER.

WHILE we have not been as loud, perhaps, as some of our contemporaries in denunciations of the medical legislation fad which runs riot in the land at present, our views on the un-called-for and illogical trend of the various medical examiners' bills are well known to our readers. The direct consequence of these has been the altering of the curricula of our colleges to correspond with the demands of our enemies.

"No one is more willing to recognize the immense good that has resulted from this enlargement of the curricula, viewed from the standpoint of general medical education; but when called upon to decide the question of the benefit to homeopathy and its development by exactly such changes, we hesitate. There can be no doubt that through the State medical examinations the homeopathic graduates, who have passed them, stand before the law and the public as the peers, in medical knowledge, of their colleagues of the school hitherto known as the 'regular,' and we believe they are. Hereby, no doubt, the name of homeopathy has been elevated, and its adoption by a larger clientele furthered—but has this been a corresponding inner growth? Has this widened scientific knowledge, on the part of its students, been devoted to the establishing more firmly the founda-

tion of homeopathy and developing its principle? We sadly confess that the evidences of this are not marked. We recognize such efforts on the part of older physicians, to whom experience has brought a realization of the value of such knowledge, which was not within their reach when students; but among the majority of the younger members of the profession a condescending tolerance of homeopathy, as in some case of some benefit, has taken the place of the just as illogical and unfortunate faith in its universal applicability of thirty years ago. Had we the faith and enthusiasm of those times, coupled with the science of the present, homeopathy would be invincible. These are not incompatible. If homeopathy be true at all, it must be willing and able to stand the investigation of science, or vanish. A 'higher criticism' is here, even more than in theology, demanded by the spirit of the age. Incalculable injury has been done to the advancement of homeopathy by the unreasoning adoration (we can think of no other word) of Hahnemann and his every word. A reaction was sure to come, and in its coming it has too often, alas! brought with it a belittling of his attainments; and his writings, while still considered by some as almost impaired, are by others set down as the vagaries of an enthusiast. No better work has been done in counteracting this latter tendency than by Bradford, in presenting a life of Hahnemann in which is brought out all that he really was. The author has given us in it a 'proving' of Hahnemann, that bitter pill which the old school has been so long attempting to annihilate because it could not swallow. In the light of his life, Hahnemannianism and its relation to homeopathy become intelligible. Let this relation be brought out in our colleges; let the students be shown what homeopathy is, and what Hahnemann thought of it, and how he came to think as he did. They will then be in a better condition to attempt to separate the wheat from the chaff, and to recognize the limits of their allowable criticism—and perhaps learn modesty. The immediate results of the knife, of the hypodermic and antitoxin syringes, are so much more dazzling than those reached with far more mental effort by attempted homeopathic treatment, that it is no wonder that in this spectacular age the young graduate is blinded."

The foregoing is taken from an excellent and eloquent editorial found in the January *Hahnemannian*, and is a clearly-stated review of the situation-medical. As to medical legislation—for instance, note the accuracy with which this writer rings the bell in the target: "... has there been a corresponding inner growth? Has this widened scientific knowledge, on the part of its students, been devoted to the establishing

more firmly the foundation of homeopathy and developing its principles? We sadly confess that the evidences of this are not marked." Ay, there's the rub, as Mr. Bacon said in his *Shakspeare*. And Pennsylvania has one of these restrictive medical laws. If by taking thought we could but add another cubit to our stature! if, by becoming duly and truly scientific, absorbing and exploiting all the chemical advances (?) of the other school from bugteriology to antitoxins,—if by doing this we could add but one more armament to the possibilities of our Law of Cure! But we can't and we don't! If we, of the later scientific generation, having renounced, in the main, what in the aforesaid made us despised as homeopaths, could but cast our shadow, and no longer be known as homeopaths, but the rather as simply Progressive Physicians, how very, very nice that would be, truly!

No; we contend that the broadening of the medical field, until we have embraced every medical fad and heresy that has had the temerity to show its head, has narrowed the school and its influence as homeopaths. It has, in very deed, made us more liberal; it has made us to occupy the position of a mere kindly tolerance of the old-fashioned homeopathy, and of that dear, good, but sadly misguided old man, Hahnemann. Oh, yes, he meant well enough; he went about doing good—we give him full credit for that—but he was an enthusiast, a zealot, a fanatic—using the word without undue offensiveness—and a reformer; yet, when all is summed up, he did naught but show us how to make an egg stand on end, and anyone can do that to-day! Why should we of this surgical and intensely skeptical age, who know all about the microbic origin of disease, and are able to do what to Hahnemann and his pioneers and sappers would have seemed miracles in surgical work—why should we give personal honor and pay tribute to Hahnemann for discovering a natural law? Go to! He is no more entitled to the veneration of his disciples than is Newton for discovering the Law of Gravitation, or Harvey for discovering the Law of Circulation,* or anyone else discovering any old thing in the domain of Nature. Now, we grant you, if he had done something distinctly scientific or noteworthy, like Koch, or Roux, or Roentgen, or Pasteur, or Pratt, or Mrs. Lease—then there would have been some call to talk of Hahnemann's individuality and personality. Besides, didn't Hippocrates, or Esculapius, or Paracelsus, or Galen, or a few dozen long-since-forgotten Confucian philosophers know and use the Law of Similars?

No; Hahnemann simply called attention to the law as the wheelwright calls attention to the puncture in your hind tire; he would not, therefore, be entitled to the wheel. He rescued a little child from a burning building; he would not, therefore, be entitled to the child. Certainly not!

If we separate Christ from Christianity, what have we left? A beautiful system of morals. But were there not other systems of religion and morals, and upon some of which much of Christianity is so palpably based? There is the religion of Buddha, and other of the far-eastern systems, that have in them many beauties which are not even dreamed of in the philosophy of Christianity. If we separate Washington from the Fatherhood of his Country, or her Gracious Majesty from the Victorian Era, or Cæsar from his Commentaries, or Robespierre from his Red Reign, or Napoleon from his Empire, or Lincoln from his Emancipation, or Grant from his Appomattox, what would there be left? Was it not the beautiful character and *life* of the gentle Saviour and his immediate followers which made it Christianity? Was it not because Hahnemann suffered and died as he did, after his system of medicine had eventually triumphed, that homeopathy became established in all the land, and is like to continue to the end of time? Is it not, therefore, eminently proper and very natural to venerate our parents, notwithstanding that, in the creation of the new generation, the thought of the moment was in an entirely different direction?

If one will read Bradford's "Life and Letters of Hahnemann," as counseled by the eloquent editorial already quoted, he will rise from his task with the feeling that it took something a little better and greater than an ordinary man to discover and promulgate and LIVE his new theology! Look about you, you gentlemen with the tolerant disposition, the flippant lip, and That Tired Feeling, and pick out from among your associates a man who would have suffered as Hahnemann suffered. Let us be just to Hahnemann. If this implies hero worship, then there are worse things than hero worship. If this be idolatry, then idolatry is sometimes most lovable. It is but just to be just to him who bore our stripes for us. Instead of belittling him by a bored tolerance of the ancient theories of Hahnemann, let us keep his memory green. Let us assume that Hahnemann knew whereof he wrote and taught and practiced; for surely if a man, in an age when every medical and former friendly hand was raised against him; when he could not appeal, in verification of his tenets and theories, to the brilliancy of his last one hundred hysterectomies without a death, or his newest technique with that Last Inch—if, notwith-

* This was before Malpighi showed him the capillary circulation between the arteries and veins.

standing all this and these, he was yet able to give a system of medicine a foothold and to hold it against his most inveterate and powerful enemies in private life, in the social circle, and in administrative circles, and pass it down the line to us, his non-hero-worshipping but bugteriological descendants, is he not deserving of some greater meed of praise than the empty honor of having been called at an opportune but accidental moment to blazon one of nature's well-known laws?

Can we conceive of the system of homeopathy having proven a success in that benighted medical age except for the martyrdom of its founder, as well as his successes? Is not this man a little grander and nobler than a mere blundering dabbler in medicine, a penny-hack translator of foreign languages, an accidental uncoverer of what was but lightly covered over? Think of his martyrdom—and we use that word advisedly, for it was martyrdom to *live* for his faith; to be exiled from home and country; to see his wife and children eating the black bread of poverty; without social position; without anything that makes life worth the living, save the integrity of his purposes; his dear faithful little German wife perishing under the weight of accumulated burdens; and then, last scene of all, having, as an old man, fallen under the blandishments of his French wife, he is hurried out of her house one bleak, cold, gloomy, rainy morning, like an unclean thing, when scarce cold in death, *sans cérémonie*, without any of the customary trappings of woe, without any funereal pomp or honor such as his distinguished life entitled him to, without homage of whatsoever kind paid to his mortal remains—he is laid in the tomb of another Joseph of Arimathea—to remain there a half century in an unmarked, unlettered, and neglected grave!

THE HIT BIRD FLUTTERS.

WE have noticed with a good deal of amusement the criticisms evoked by some of the writings in this journal. But we have, also, noticed that the contemporaries who have most to say of our "slippancy" and "sensationalism" have occasion for soreness and disgruntlement. One of these, in especial, was made the target recently of our slippancy, for permitting its pharmaceutical owners and publishers to print four pages of Combination Homeopathic (?) Remedies, with the added effrontery of saying that prominent homeopathic physicians recommend their use! And so with other of the fault-finders with our methods. We make no doubt that if we would obligingly keep quiet about the Baltimore Investigation Club's Plan, or the "Cyclopedia of Drug Pathogenesis," or the Materia Medica Conference, or the alleged wrongs

in the policy of the American Institute of Homeopathy, or the preacher element in medical colleges, and several other warm questions, and gave our space "to throwing bouquets at ourself" and individual members of the medical or editorial profession, we would soon achieve the same amount of obscurity and indifferentism of the several pharmaceutically-owned journals which now have so much to say of our slippancy and sensationalism.

THE INSTITUTE TRANSACTIONS.

THE official record of the Buffalo session has reached our table, and presents many palpable differences over its immediate predecessors in the book line. First is the smaller size of the volume and the lesser number of pages. The 1896 volume gave us 1284 pages, while the present volume has but 856 pages. On looking through the current volume, however, we notice at once that this smaller number of pages is in great part produced by the smaller type and greater compactness of the arrangement adopted. We note, also, that the printing is done in New York under the eye of the vigilant general secretary, who is himself a practical bookman and editor. There is evidence, too, of the industry of the Revisory Committee in cutting down some of the discussions to "hard pan," and so eliminating many of the extemporary "spread-eagle" efforts. We note many strokes of the omnipotent "blue" pencil in the discussions of the second session of the Materia Medica Conference—all, however, tending to the benefit of the Institute. This gives the Transactions much the appearance of a speech delivered in Congress on the one day and its peculiar reproduction in the *Congressional Record* a week or two thereafter. But, perhaps, this is proper—to have that speech appear in the printed doings as we would like to have it appear for after generations to read and admire, after carefully studying the subject at greater leisure in the pregnant quiet of our library. To return to the mechanical part of the book, we find nothing to be captious about. It is well printed on good paper and well arranged. It gives evidence on every page of an intelligent oversight by a master in the editorial and printing profession. In our estimation it is one of the best and prettiest bits of printing that the Institute has issued for many years. We are greatly pleased to note also the introduction of the president's photograph as a prominent frontispiece of recent volumes. We deem this a wise and appropriate expenditure and trust it will continue to the end, with but one proviso, namely that the photo-engraving of another official,—the REAL official of the Institute, the hard-

est-worked officer of the Institute,—the General Secretary, is also incorporated. Do we hear a second?

AS TO THROAT-CUTTING.

In Brooklyn physicians are said to be hiring as motormen. Dispensaries and patent medicines are the alleged causes.—*The Medical Examiner*.
—*Medical Counselor*.

There, now, ladies and gentlemen of the medical profession, cut that "cutting" out and paste it at the head of the next subscription paper which you circulate among your wealthy patients and their friends in aid of some hospital or maternité or clinic or dispensary. Instead of helping the medical profession to a fair livelihood, become an active agent in sharpening the knife which lies at your own throat. Instead of doing something to put bread in the mouths of your needy brethren, those who have complied with all the letter-perfect requirements of the State board for keeping out all practical but no longer letter and book-perfect physicians from other States, it is your duty to solicit alms wherewith to build some palatial hospital with "drug store" prices for everything, from an extra bit of toast or an extra "drum-stick" to the use of the surgery for operations. Instead of subscribing or inducing others to subscribe a few thousands to the Hahnemann Monument Fund—which is a purely praiseworthy and most honorable project, a measure which will redound to the credit of the school and to each individual in the profession, and at the same time taking no bread from your brother's mouth, neither now nor hereafter,—your duty seems to be to discourage all appeals to your millionaire patients, whom you are apparently carrying in your hip-pocket, lest by giving generously to this noble fund, they will fail to provide an ambulance and horse for your favorite hospital. Instead of letting the committee make an impassioned appeal to your college professors, they are ordered to wait until you have drained them dry for other purposes—college clinics, college dispensaries, college hospital, and a half hundred other college ways of cutting your professional throat. It must give you so much enjoyment to read that professional men of book-merit sufficient to pass the State Inquisition of Torquemada have been obliged to go to street-car motoring or engage in something else to keep soul and body together! Oh, keep right on, you gentlemen of the profession, who, being *now* in the land of milk and honey, have laid by sufficient to rest in peace and security for the remainder of your protected days; keep right on "raising the standard" of the profession for the *other* fellows from Indiana and farthest gall,—near by Chicago, and in time you will find, as

even now the report is gaining currency, that the protected people, being legislatively denied the free American privilege of selecting and employing its own favorite physician, who may live but a cable-tow's length on the other side of your sacred groves, refuses to be bull-dozed into calling in the free-hospital and free-clinic and free-dispensary physicians, and so they resort to patent medicines. And those who have no means, or are too ill to be miraculously cured by seventeen bottles of molasses and whisky and celery-essence and opium, will go to the free clinics and free dispensaries which you have provided; or they will belong to lodges, as they do in California, which pay fifty cents a head per year to its one syndicate doctor, who (in shame be it said) in several known instances are former well-known, respected homeopaths, teachers, and authors! Keep right on collecting largesses for hospitals and other public medical charities. That's another good way, also, to reduce ultimate competition. For you can just as easily kill a doctor by starving him after you have let him climb over your Chinese wall as you can by firing legislative chain-shot and poisoned arrows at him while he is trying to climb over your unconstitutional fence. But the ax is being sharpened that will be laid at the root of your special tree! Let us raise the standard! Oh, by all means, yes! Let us raise it so blamed high that neither we, who are in and, therefore, cannot be hurt, nor those who are out, can touch it with a forty-foot pole! Let us collect more and still more and yet more money for millionaire-hospital corporations and dispensaries. Let us give more progressive euchre parties, and five o'clock teas, and church fairs to help the free-hospitals and the free clinics and free dispensaries and free medical charities of every form and description to lay us by the heels. And in the rapidly nearing end, street-car-motoring will be engaged in *de novo* by many embryo McDowells, and Helmuths, and Allens, and Arndts, and Hugheses, and Cartiers, and other mute inglorious medical Miltons, and not as a possible after-clap to a successful medical graduation and subsequent passing of a bitterly unjust State medical examination!

THE OMAHA MEETING.

WE are informed by Drs. Hanchett and Foote that everything is being done that can be done to make the Omaha meeting of the American Institute of Homeopathy the banner meeting of the Institute, not excepting any of the recent extraordinary occasions such as the International Congress or the World's Fair sessions. We bespeak for the Omaha people a good, rousing meeting of all sections of the In-

stitute from all sections of the country. Advance literature and notifications of the expected attractions make us to feel that no one will be disappointed who has the time to make this summer jaunt to the West. This is now the time for the several sectional chairmen to push earnestly and to bring to the front the very best that can be found in the several specialties.

SUB-DIVISION OF INSTITUTE WORK.

IN one of the letters anent the Institute in the *North American Journal of Homeopathy*, we note the complaint that there is evident a disposition to subdivide the sectional work of the Institute, and still continue the work as and for the Institute proper. The correspondent refers, for an instance in point, to the Materia Medica Conference, and makes his point good, when he says that the materia medica men who are in attendance in advance of the sessions of the Institute, having concluded the business of that conference, are impatient of the later appearance of the legitimate section in materia medica, and either do not await the time of its arrival or give it the cold shoulder. This is true also of the ophthalmological people. In the former instance it would puzzle a good many of the well-wishers of the Materia Medica Conference to give a good reason for making that committee an extra-official body, when the true materia medica section is still continued in its proper order. We happen to know that Dr. Deschere, the last Materia Medica Section chairman, gave a great share of his time during the last year in the preparation of his section; yet what was his reward? Let those who were present at his first session—to say nothing of the attempted second—say. It seems to be misunderstood, this section, as also the conference. If the Materia Medica Section is to be naught but repetitions of drug provings, then it is out of place, since that is provided for in another committee; if its scope is the recitation of clinical work, then it belongs either to clinical medicine *per se*, or to pedology and the other medical sub-divisions. Clearly all materia medica topics belong to the Materia Medica Section; and the introduction of a new committee or section is an infringement of that same Materia Medica Section, so that we agree with the *North American Journal* complainant, that many of the sections of the Institute could be advantageously “bunched,” thus also cutting down the time required for holding the Institute.

Le Blonde treats chronic catarrh of the vagina by the use of electricity. He introduces into the vagina the positive pole, wrapped in a solution of the chloride of sodium.

Book Reviews.

DR. H. GROSS' COMPARATIVE MATERIA MEDICA. Edited by CONSTANTINE HERING. Second edition. Philadelphia: Boericke & Tafel, 1897.

This book has been lying on our review table for some weeks, not by any means unnoticed or forgotten, but only waiting for a more favorable opportunity in which to speak of its merit as it deserves. But the time does not seem to be near at hand when it will be likely that we can say more than we had thought of saying the very first day we received this Second Edition, or did say when the First Edition was put in our hands by our preceptor; and that was that Gross' “Comparative” is one of the classics of the homeopathic materia medica, without which it is practically impossible to keep (homeopathic) “shop.” It has only one defect, namely, that like Sam Weller's love letter, it is too short. The book, it is needless to say to the older homeopathic homeopath, is not a new creation, as it was edited by the immortal Hering, but has been out of print so long that the newer generation of homeopaths may not have seen it. Further, it may also be intimated that it is built on the “imperfect” Hahnemannian materia medica, but withal a book to be cherished and constantly used. If, for instance, you have a peculiar symptom that eludes your mental grasp, and you do not know in which of several medicines it is to be found, you may turn up one of those suspected remedies, when you will find not alone that remedy, but a number of others ranged by the side of the one you have turned up, so that you will have before you that special symptom in half a dozen or more remedies, but, in addition, that which is most valuable, the concomitants and accessories of the complete remedy in each case laid before you in the compass of a half page. Again, in these comparisons, you will find the contraries of the symptoms you may be running down. It shows the one looked-for remedy in a clear, characteristic light; and also its opposites. It shows its congener remedies. You have sometimes found that sulphur and pulsatilla have a particular symptom so nearly alike that it will puzzle you

greatly to know which one of the remedies to select *on that one symptom*. By turning to either of these remedies in this book the two remedies will be seen ranged in parallel columns on one page, so we will be able to see wherein that one symptom lacks in the other characteristics of your patient, and, therefore, the right remedy will be presently suggested. In other words, this book, by its system of comparisons of familiar remedies, shows the absolute unreliability of any *one* symptom in the treatment of a case, and does show the necessity of taking the totality of the symptoms. Now, suppose you have been studying *pulsatilla* in Farrington with no special case in view. After going through the remedy carefully, committing its apparently more salient points to memory, it suddenly occurs to you that this or that special symptom which now you are trying to absorb as markedly a *pulsatilla* characteristic, is also familiar to you as occurring in *sepia*, or *rhus*, or *sulphur*. You therefore refer again to that noble work of Farrington, and after going through a number of pages you find the symptom, sure enough. Now what shall you do? Instead of clearing up matters you have added to your undoing. "Why can't some of these teachers and book-makers give us *ONE* book that will show to a busy man the practical and indisputable things of a remedy, and not tell us that it is good in constipation and then, three lines below, it is also good in diarrhea." That book lies before us now in Gross' "Comparative Materia Medica." Turn up *Pulsatilla*, and you find on the left hand side of the page *Pulsatilla* and *Rhus*, on the next page, *Pulsatilla* and *Sepia*, next *Pulsatilla* and *Stannum*, next *Pulsatilla* and *Sulphur*, next *Pulsatilla* and *Sulphur*. Acid, next *Pulsatilla* and *Thuya*, sharply and clearly compared. While running through these comparisons, in perhaps thirty lines, all the peculiarities of *pulsatilla* will be repeated over and over again, with each of its comparing remedies, so that the particular symptom you had selected, as undoubtedly peculiar to *pulsatilla*, will be found to appear in each of the compared remedies; but, on the other hand, by comparing the *whole* remedy in each case, with the whole remedy ranged to its right, you will discover when to give *pulsatilla*, whether your

patient has diarrhea or a constipated bowel. Is not this a precious work?

Gross' "Comparative" deals only with the well-proven and well-used remedies of the homeopathic materia medica, though giving, all told, 111 remedies. We know of no book in the homeopathic library that can excel this one for running down an elusive symptom, one that the searcher believes to be in one of three or four remedies, but not certain in which. When he turns up one of those remedies his study may take him entirely away from his first remedy and put him into a wholly new line of thought and search, and ultimately give him the key to the case. We feel certain that a study of this book will make better homeopaths of the students and practitioners. Can a book have a better praise in this day of bacteria and skepticism!

We venture to affirm if this "Comparative Materia Medica" were fully understood and taught in the schools there would soon cease to be that professional clamor for a revision of the Hahnemann *Materia Medica*.

Correspondence.

ROCKVILLE, CONN., February 7, 1898.

Editor of the AMERICAN HOMEOPATHIST:

Dear Sir: I was much interested in the article of your issue of January 15, entitled "Jugular Vein Cut—Recovery." It had special interest for me, as I had a similar case some twelve years ago while located at Lyndonville, Vt. An insane man from Troy, Vt., was on his way to the asylum at Brattleboro, accompanied by his daughter and the first selectman. On the arrival of the train at Lyndonville he escaped their vigilance, jumped from the train, whipped out his jackknife and drew it across his throat, nearly from ear to ear, almost severing the external jugular vein. He was conveyed to the hotel and a man was dispatched for me. I reached him in about half an hour. As I went into the room I was greeted with the report that I was too late; the man was dead. A hasty examination seemed to confirm their prognosis. Respiration had ceased and the pulse was imperceptible, but the blood was oozing from the severed jugular vein in paroxysms, showing some heart action. He had lost a large amount of blood and the case seemed hopeless. However, I said that the wound should be closed, even if he were dead; so I ligated the vein and began to stitch the wound; at the tenth stitch he began to show

signs of life, and by the time I had the twelfth and last in place he was making vigorous protest to the sewing process. I dressed the wound in calendula, 1-4 of water, and in forty-eight hours he was in a condition to resume his journey to Brattleboro, where he arrived without further mishap.

The case and condition of the wound led the staff (allopath) to inquire about the doctor who did so good a job, and, of course, were disgusted to learn that it was a young homeopath only three years from college.

Yours respectfully,

W. CLINTON TILLOTSON, M. D.

Globules.

At a regular meeting of the Cleveland Homeopathic Medical Society, Dr. G. J. Jones was elected president.

O'Connor's "Nervous Diseases" has reached our table from the press of Boericke, Runyon & Ernesty of New York. A handsome book. Review notice later.

The Chicago Homeopathic Medical College holds its eighth annual post-graduate clinical course, beginning Monday, March 28, 1898. The same to continue two weeks.

Dr. W. Golden Mortimer, 504 West 146th Street, New York, is preparing a work on *Coca* and requests the profession to forward to him personal observations and experiences in the use of coca.

If preceptors would instill into their pupils' minds that there is something to be learned in a homeopathic college beside hysterectomies and amputations many a promising general practitioner would be graduated.

Why does the law invariably assume that any physician, however eminent in his profession, is guilty of criminal wrong if harm comes of any of his patients? Is this not a fact? Think of it a moment. Let anything happen in a physician's office from a faint to a death, and at once that physician is put on the defensive. His reputation is at the mercy of any strolling strumpet who may choose to charge him with anything entering her diseased brain. If he presents a bill for services, however faithfully performed, he takes the risk of having that patient refuse payment, and if he dares press his suit with a suit at law, then he must face the not remote possibility of charges against his professional integrity and personal honor and so be put to expense and needless defense. Suppose the doctors combine a bit and take a hand in the

making of the laws—and see if some little protection cannot be thrown about the profession of medicine.

Engel's "Lumbarin," of which we made editorial mention a year or more ago, is an excellent medium for restoring broken down constitutions from excesses of whatever nature, and is said to have a greater value in opium addiction. Louis Koch & Co., Philadelphia, handle the late Dr. Hugo Engel's discovery.

Have you ever noticed that when a rampant circular is printed in pretended type-writer type, that it is always made to appear as if the type were worn out, out of line, and generally battered up. Would any typewriter firm of any standing dare turn out actual letters or circulars looking as disgraceful and "botchy" as these pseudo type-written circulars?

Dr. George W. Spencer of Cleveland attended a special course at Columbia College, New York, in experimental physiology last fall, perfecting himself in the detail necessary for laboratory work in his chair in the Cleveland Homeopathic Medical College. Dr. Spencer is a very earnest and enthusiastic student of physiology.

The Executive Committee of the American Institute of Homeopathy, through its President and General Secretary, has issued an address to the membership reciting the probable advantages to the Institute and to each member in going to Omaha this coming June. It is a handsome document and worthy of a careful perusal. It is very evident, from all information received at this office concerning the Omaha meet, that it is going to be one of the events in the history of the Institute.

The homeopathic hospital at Ann Arbor is full of patients. Carry the news to that handful of disruptionists of a recent period, who were not backward in prophesying that if the college remained at Ann Arbor it would lose its prestige, and its hospital be empty. It must cut some one of these raven prophets a good deal to hear no reports of bickerings and quarrels in the faculty, as has been the custom from almost the beginning until the present régime. It looks very much as if had former faculties been more intent upon the good of the school as a whole, and not so much upon what they could squeeze out of the chair by neglecting it, and go gallivanting over the State and neighboring States and doing private operations, there might not have been that more recent disruption and threatened destruction. It goes to prove, also, that one quarrel-seeking member in a faculty can keep that faculty in hot water all the time. The present faculty seems to have discovered the great secret

of harmony, or, as Brother Chase said in a recent letter, that more noble and glorious contention of who can best work and who best agree, in advancing the cause of homeopathy. All honor to Ann Arbor and its band of professors!

The Missouri Institute of Homeopathy is making preparations for a large and interesting annual session at St. Louis in April. Dr. Brady makes a thorough secretary.

The *Medical Visitor* thinks that one cause of the bad financial condition of the Institute is in the large salaries paid the officers. It may look that way: but we hardly think that the *Medical Visitor* man appreciates the amount of work entailed upon, let us say, the General Secretary. With the rapid increase in the membership, and the careful revising of the copy presented to the Institute, we question very seriously whether this officer is overpaid. It is no argument whatever to quote the fact that because Dr. Dudley worked for a less sum he was not entitled to the larger sum now paid.

The reason the Easton sanitarium has become so popular, is on account of the number of very severe cases of mania and melancholia that have been cured in the institution during the past year, and how's this, ye allopathic file-biters of Missouri: "I desire especially [says Dr. Coombs, homeopathic superintendent of the Fulton Insane Asylum] to call attention to the fact that while the *number of patients* has materially increased, the *number of deaths* has been *one-fourth* less than for the corresponding period of last year [under allopathic misrule]; and that the *number discharged as cured* has been *one-fifth* greater."

The *North American Journal of Homeopathy* must have been astonished to find, in all of its correspondents' communications, traces of dissatisfaction with the conduct of the American Institute. But why shut off the discussion so peremptorily? And now comes Strickler, the Statistician, with some more figures backing up his original claim of favoritism in the bestowal of Institute appointments. It is no use, gentlemen of the conservative wing, give way! There is a wide-spread feeling that a half dozen or a dozen men should not carry all the appointments of the Institute, year after year. Better reach out occasionally and find a young man to shoulder some of the honors.

The State Lunatic Asylum No. 1, Fulton, Mo., has made its annual report, and a good report it is. We do not wonder that the "Regulars" continue to rend the Governor for appointing homeopaths; this kind of a report is enough to turn the average allopath's hair gray with vexation; for at every point is an improvement over

the former allopathic treatment. In the Board of Managers we find the names of H. W. Westover, M. D., of St. Joseph, and W. L. Reed, M. D., of St. Louis. That's warranty enough to the homeopathic profession and laity, that the Fulton asylum will be run on the homeopathic plan.

The New Murray Hotel at Omaha will be one of the chief points for the gathering of the American Institute of Homeopathy's members and guests. First class in all its appointments, centrally located, and liberal rates.

If you are planning thus early for your Omaha trip in June to the hubbub and the Trans-Mississippi Exposition make a memo. to the effect that you will travel via The Chicago, Milwaukee, and St. Paul Railway. First-class road; first-class accommodations.

If you feel any doubt of the value of homeopathy in the treatment of the Insane send for Dr. Coombs' report of the Fulton (Mo.) asylum for the year closing January, 1898. It's good reading matter. It ought to be sent to Dr. Sutherland of Lincoln, Neb., and also to Dr. George M. Gould of Philadelphia, not for publication, but merely as an earnest of good faith. Dr. Coombs has handled the Fulton asylum with a master-hand, both in medicine and finance.

Quite a number of our contemporaries have printed an original communication from a homeopathic physician, in each journal a different topic, it is true, but it invariably somewhere, either in the body of the article or as a footnote, injects something about "my recent work on thus and so, to be had of Brown, Jones & Robinson of Chicago," etc. It is a very clever ad. of his book, and it has amused us to see how easily the several journals have swallowed the hook and bait. Still the little book will not have a large sale, because inherently it is not worthy to survive.

The *Homeopathic Journal of Surgery and Gynecology* has appeared on our table in its first number. Dr. Fisher, its editor, has done a wonderful work in compiling this surgical data and presenting it in this compact and logical form. This number contains contributions which are alone worth the price of the year's subscription. Its plates are beautiful and very graphic. As a frontispiece it gives the portrait of Surgeon W. Tod Helmuth, who is also the sweet singer of our profession. The book is well printed, neatly bound, contains 110 pp., and is well supported by the surgeons and gynecologists who have contributed to its pages. We prophesy that it will be a popular journal from the first number, and as it is built up in good

faith and upon the needs of the profession, and not upon a foundation of malice and spite, it deserves to succeed.

Mustard is a very efficient deodorizer for the hands after working with anatomic material, and a well-known surgeon is recorded to have gone directly from a dissection to his operating room after such disinfection. It may be employed in any case when speedy and thorough disinfection of the hands is required; after post-mortems, removal of placental remains from the uterus, the opening of abscesses, the handling of gangrenous parts, etc. Not the least of its advantages is the fact that it is to be found in every household.—*Med. Times*.

The statement has been made, and is probably near the mark, that fifty per cent. of the people will shirk paying their doctor and will lower themselves to almost any mean subterfuge in order to save a few dollars. The belief would appear to be widespread that physicians earn their fees easily, and they are in consequence looked upon as a fair game by that class of the community which likes to get something for nothing. A custom prevails in this country that ministers should be considered as free from any pecuniary obligation to the doctor for services rendered. This custom has been in existence for so long a time that the fact seems to have been forgotten that this free service is only an act of courtesy on the part of the physician, and not, as the minister imagines, by any means binding. The explanation for this state of affairs is not easy to give.—*Id. Med. Journal*.

High Potencies.—"A year ago a set of high potencies was promised the Hospital by Dr. Young. This set was to consist of really two sets, one in form to be dispensed, and the other set to be kept and used as stock—to replenish the dispensing bottles. The former are all done and have been in use some months. The latter set are almost prepared and will soon be with the others. The box to hold the potencies was donated by Dr. Wright for the purpose, and formerly belonged to Dr. Noah H. Warner, the first Homeopathic Physician in Buffalo.

"The value of the case filled with potencies will be, at regular rates, about \$65.00."—*The (Buffalo) Hospital Leaflet*.

There is nothing peculiar about this item, except the fact that here is a first-class *Leaflet* in a first-class hospital, in a first-class city, in a first-class State, admitting that it has been given a case of high potencies by Dr. Young, with a value of \$65.00, and, what is more to the point, has been using them for some months. And no corresponding howl is going up from the old-fashioned homeopath who used to froth at the mouth and bubble over at another point,

whenever anyone in his hearing mentioned "high potencies!" Truly, the worl' do move!

Dr. H. F. Biggar of Cleveland is taking a little midwinter vacation sailing in the Gulf of Mexico, touching shore long enough to hear from home. At Key West recently he engaged in a little piscatorial diversion, landing a forty-five-pound tarpon, the first of the season.

From *The Medical World* we learn that a Mexican boy, about twelve years old, had tetanus and that cocaine was prescribed. The druggist, however, gave ten times the prescribed dose. This was not known till after the remedy had been given, but the result was complete recovery.

The *Chicago Record* of a recent date gives a group-picture of three eminent clergymen who have been restored to health and vigor by the Copeland system of treating catarrh. These three "gospel-sharps" contribute each a letter of the customary grateful variety endorsing the wonderful treatment. Why should the clergy, presumably an educated profession, one which is certainly highly honored—lend itself to this pitiful form of cheap advertising? Is this the way to practice the golden rule? Recently Talmage loaned his name and reputation to bolster up Greene's Nervura, lauding preacher-fashion its strength-giving virtues to the sky. It must have contained a good deal of "ambition," for within the following fortnight he took unto himself a young wife. Is it to be wondered that the medical fraternity has so little use for a brother of the church, when that brother seeks to injure them in the above fashion—not the later Talmage fashion—but of the quack-medicine-recommending fashion; or the recommending of any old truck that comes along and sends the minister a half dozen bottles to try for nothing? A minister who so far forgets the dignity of his profession, as to permit his picture to appear in a daily paper accompanied by a letter commending this or that patented preparation, of the ingredients of which he knows naught, ought to be asked to resign his pulpit and take up blacking vending on the street-corner. He is too shallow-pated, too ignorant of the ways of the world, too vain of his portrait to be in authority over a congregation of men and women among whom there may be honorable physicians. Out with these trucklers after cheap notoriety, these prostitutes of the cloth! But ye have made it a mockery and a by-word among honorable men and women!

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The American Homeopathist.

NEW YORK, MARCH 15, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



S. WILSON HOUSTON, M. D.,
Warners, N. Y.

BAKING-POWDER ETHICS.

AFTER noting and studying for some time the creeping into the best of our daily papers of column upon column of nauseating medicine advertisements with pictures and portraits galore, it would seem at last only a question of time when some real newspaper man like Horace Greeley, or Charles A. Dana, or Joseph McCullagh, or Prentice, or any one of that Old Guard of Journalists, shall rise from the patent-medicine slush and slop, which now seems to pass current as news, and give the people a NEWS paper

devoted to the collection and dissemination of news; for we question if even the most brazen of modern daily papers will affirm that this shameful surrender to monopolistic medicine corporations of newspaper space is news within the intent and meaning of that word, and for the which the subscriber pays his obolus. Some few years ago, and easily within the memory of the present patent-medicine-guzzling generation, "patent-insides" made it possible for every community, however small or lowly or insignificant, to have its local WEEKLY with its "we" editors and publishers and sworn-to circulation and second-class postal franchises. That form of newspaper was, however, so much and so continually ridiculed that at this time it has almost wholly disappeared. But with its going there has come the larger and more offensive form of evil which may justly be called The Patent Medicine Era of the Modern Newspaper. Now we are caused to look upon a choice array of ex-notabilities, from Clara Barton and Rev. Talmage to the Mayor of Hartford, who are giving praise and indorsement, under God, to several of the more rampant, well-advertised patent medicines, for his or her or their prompt and permanent restoration to buxom health and business or third marriage virility.

* *

NOT so many years ago St. Jacob's Oil made itself exceedingly disliked by its cunningly worded and concealed advertisements; and so it gradually faded out. But the St. Jacob's Oil ad. never, in its most aggravated form, attempted the flaring and disgusting series of advertisements which may to-day be found in the very best of our metropolitan journals. It simply injected a line or two here and there in the body of a news article, or added it to the end thereof. And when accompanied by a picture it was merely that calm and well-cowled old monk, sitting at the foot of a tree, examining and admiring and possibly tasting a little black bottle held in his right hand, amid the chaste and virgin solitude of the Schwarzwald. In this same innocent and unobtrusive way we have grown accustomed to the Douglas shoe face, and

the Woodbury facial face ; but, to-day, the largest and most brazen of portraits is flaunted in the face of the innocent reader, backed by columns of ridiculous medical "hogwash," professional slander, and thank-God testimonials. At one time these rhapsodical and rhetorical indorsements of almost every old thing that came along, from nursing bottles to hand-made shrouds, were chiefly confined to country ministers of the Gospel who had tortured their digestive apparatus with years of yellow-legged chickens, saleratus-biscuits, and chicory-coffee, with their praises always keyed to a concert pitch ; but, in the main, these were confined within the covers of the yellow-backed almanac with its eviscerated signs of the Zodiac man, and weather forecasts ; but now the indorsing fever has touched even the very elect—the hard-headed, tight-fisted business man, who is presumably too much alive to the main chance to give his face and his signature for that modern mess of pottage—a passing notoriety in a Saturday or Sunday morning's paper. Shall we conclude, therefore, that he is not above selling his integrity at so much per face or signature ? What has come over the daily press any way ? Has the old notion of a newspaper filled with news for so many pennies a copy become obsolete ? Have we progressed from news to patents ? Does the counting-room in reality control the whole newspaper—scissors, paste-pot, ink-roller, towel, alleged brains, and all ? Then the lesson of Professor Andrews and Brown University was truly given in vain. And what, too, has come to the people ? Have they all gone picture and portrait and patent medicine mad ?

* *

NOW while patent-medicine advertisements were bad enough, here comes the acme of agonies. Now we have the charming, feminine, soul-uplifting spectacle of the W. C. T. U. entering this notoriety field as the advertising agents for Rumford's Baking Powder ! This great organization engaged in recommending a baking powder, with a commission on sales made ! Anything, anything, dear Lord, so we get lots of money. Never mind about the eternal fitness of things. Never mind about the hawking in the daily press of a facsimile letterhead of this noble order, with all the officers' names carefully printed in upper-case type. Never mind about the noon prayers ; or the unsoiled, non-partisan white ribbon ; or the mouth-filling motto of the order. This is business ! Give us money, dear friends, and lots of it, and we will pay off the mortgage on that White Elephant in Chicago, and shut up all the liquor saloons, and all the bad, bad places everywhere, and squinch the appetite for immoralities ! Give us, dear Lord, wisdom and cunning, and palaver and soft-soap,

so that we may bamboozle the dear people into believing that the baking powder they have been using is a fraud, and this present baking powder is all that it claims to be : for do we not receive a good fat commission on all such sales ! Give us this and these things, and we will, in addition, present to each female inhabitant of Booribhoola-Gha a red-flannel night cap, a polyglot Bible, the latest receipt for making five o'clock Welsh rare-bit, and a year's subscription to Butterick's patterns ! And to each male voter in the same precinct we will send a white plug hat (minus the crown), and a hand-worked kummerbund ! But give us money ! For, dear friends, the end justifies the means !

* *

A NEWSPAPER of this day not given over in great part to patent medicines and something-for-nothing advertisements, word-guessing contests, and portraits would be as much out of place as a drug store which is really a drug store—that is to say, selling drugs when prescribed by physicians. And yet the latter is beginning to take hold on the profession. We know of at least one drug store in St. Louis, and one in Cleveland, where nothing is to be had but legitimate drugs and these only upon a physician's order. It goes without saying that the room is not a marble palace flashing with plate mirrors and innumerable lights. There is no imposing array of bottles and patent medicines. There are no gilded youths of both sexes seated about that marvel of marble, the soda fountain, sipping drinks, the while constructing immoral assignations. There is a total absence of the cigar cases, the perfumery, soap, and toilet cases ; toilet paper, tin ware, glass ware, wooden ware, willow ware, rubber ware, underwear, bird cages, Christmas toys, candies, chewing gum, sealing wax and boot blacking cannot found here. None of these and a hundred other articles which go to make up a modern "pharmacy" are to be found in these drug-selling drug stores. And from all accounts they are doing a good business. But we have yet to hear of even one modern daily paper which refuses to pad its columns with patent-medicine and other palpably nonsensical if not fraudulent advertisements ; or of one person who would not glory to see his portrait sent all over the land on some Saturday or Sunday morning. The modern drug store, like the modern newspaper, has utterly fallen away from its primal intent and purpose ; the one has become the chief depository of the patent-medicine fake-ry, while the other is now become its chief fugleman ! We hope for amelioration of this evil only from the patent-medicine companies themselves : for, presently, they will realize that this form of advertising is becoming too common to hold the dear public ; and then,

happily, something else will be resorted to, and our morning and evening papers will once more be freed of this overabundance of hysterical medical lore—and baking powder!

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

CLINICAL CONFIRMATIONS.

Aranea Diadema IN MALARIAL CONDITIONS.—Dr. H. A. Roberts²⁰ reports the following case:

Man about thirty years of age, of nervous temperament.

Malarial poisoning of a severe degree.

Weakness all the time except during chill.

Chill while clock strikes 4 P. M. daily.

No premonition to chill.

Shaking and exceedingly cold all the time.

For hours afterward it seemed impossible for him to regain his normal heat.

No fever at any time.

No thirst at all.

Chill more severe on stormy days.

He had been under old school treatment for two weeks and had taken as high as forty grains of quinine a day, with no effect whatever only to produce the unpleasant symptoms of that treatment. I prescribed *aranea* 200th at 2 P. M.; and at 4 P. M., the time for his chill, he was exceedingly cold, but did not shake with cold as he had done before, and he regained his normal warmth much quicker than before. The next day he was at work and had no bad symptoms at 4 P. M. at all, and has not had a chill since; moreover, having had a fit of sickness since,—the grip, which laid him up for over a week,—showing none of the periodicity which is so common a sequel of severe malarial poisoning.

Crocus IN RHUS TOX. POISONING.—Dr. E. B. Morey¹¹ relates the following striking verification of *crocus*:

"A domestic was badly poisoned in July, 1895, by poison ivy on her face, neck, chest, arms, and hands. Under belladonna and *rhus* internally, and zinc ointment externally, to relieve

the unbearable itching and burning, the case appeared to make a rapid recovery, and the patient was able to go to her home several miles away in about a week. The poisoning occurred during her menstrual period. About the 1st of September, 1897, and without to her knowledge having been near the ivy again, she had another severe attack very similar in character, and this time it also developed during the menstrual period. A short time ago she came to me again, very much alarmed, as her old trouble was apparently developing rapidly and as bad as ever. Upon questioning her carefully, I learned that since she was so badly poisoned she has frequently had some recurrence of the eruption, and always at the menstrual period. She said her flow came on about a week before she came to me the last time, that it was very scanty, dark, and clotted, as had been the case for some time; that she had only fairly begun to flow when she ceased suddenly, and then the eruption appeared. The scanty, very dark, and clotted flow led me at once to think of *crocus*, which I gave alone. A few days later she reported that the first dose re-established the flow, which was normal both in quantity and color, and the eruption at once disappeared entirely."

The menstrual flow of *crocus* is usually profuse, while the dark clots are only referred to in clinical symptoms. The dark or black-clotted stringy blood is, however, a well-established characteristic of *crocus*.

Aranea Diadema IN NEURALGIA.—Dr. Roberts²⁰ relates another typical case: Married woman, aged twenty-eight, having had five children in rapid succession.

Neuralgia in trifacial, intercostal, and uterine and anterior crural nerves.

Pains sharp, shooting, following each pulsation of the arteries.

Pains only on right side.

Pains follow course of nerve tracks from terminal end to nerve center.

> from hard pressure.

< at menstrual period, especially before, but still during the whole cycle.

< 12 o'clock at night, unbearable, driving her out of bed.

< returning to bed until 5 A. M.

< again 3 to 8 P. M.

At 3.30 p. m. daily a sharp chill.

Aggravations appear like clockwork.

During an attack she cannot keep warm even close to a good fire.

< before and during a storm or cloudy weather.

In morning, on rising, mouthfuls of dark, coagulated blood roll up into the mouth. On one occasion it was bright red and not coagulated; this lasts for one or two hours, but there will be about four or five mouthfuls every morning; the taste of blood is always present. Upon physical examination of chest there are no râles and the lungs are perfectly sound.

Small area tender on pressure over pit of stomach.

During attack marked distention of abdomen, as large as though seven months pregnant.

Distention relieved when pain stops.

Menses every three weeks, lasting seven days.

Menstrual pain bearing down.

"Sensation as if the parts would protrude, and I often stand doing my work with my legs crossed so as to support myself there."

The 200th has relieved all of the symptoms, except now and then on stormy days she gets a little return of the neuralgic pains, and there is still tenderness on pressure over the pit of the stomach, but the menses returned to their normal time and duration.

Thuja IN SUPPRESSED GONORRHEA.—Dr. C. E. Fisher¹⁴ narrates the following: "A medical friend had gonorrhea in early life. It ran the usual course, subsiding under constitutional treatment in due season, and for many years there seemed not to be any effects traceable to it. Finally, locomotor ataxia symptoms began to show themselves. I suspected that the old gonorrhea might, perhaps, be responsible. Acting upon this hypothesis, I prescribed a few doses of thuja, and after two weeks of treatment there began to be evidences of urethral moisture, and within a week more he was showing a plentiful discharge of thick, creamy pus. With the appearance of this his nervous symptoms began to improve, and in the course of a few weeks he was apparently well, neurologically speaking, but was draining like a sugar tree. Any sudden suppression of the urethral discharge would be followed by increase of nervous

symptoms, while, on the contrary, he felt well physically and nervously so long as the flow continued. For more than six months this lasted, the patient improving steadily, until finally, under thuja, sulphur, and psorinum, administered almost if not altogether empirically, though always in higher attenuation, the discharge gradually subsided, the patient remaining well."

Zincum IN MENINGITIS.—Dr. Molson¹⁶ reported two cases differing widely as to cause. One was an infant, aged eleven months, who had suppressed measles. Wet packs and the ordinary remedies failed to bring out the eruption. When at the end of his resources, after three weeks of failure, he happened to see in Farrington's *Materia Medica* that zinc was capable of developing a hidden exanthem. Accordingly, he gave the patient this remedy in the form of zincum metallicum. The long absent eruption became fully exposed, and the child went on to a rapid recovery. Some years afterward a girl aged eleven years had meningitis, presumably from heat stroke. Her shrieks were frequent and distressing. Dr. Day, who saw the child in consultation, suggested the use of apis. For a short time there was some improvement, and then the child relapsed. Remembering his success with zinc, Dr. Molson decided to try this remedy again, and gave zincum phosphidum 3x trituration. From the moment this remedy was used the patient improved, consciousness was regained, and continued progress ended in an early convalescence. In both instances he was satisfied that it was the zinc which touched the mischief. He strongly advocated the early employment of this remedy, either in the form of zincum metallicum 3x, or zincum phosphidum 3x.

Mezereum IN ECZEMA.—Dr. S. R. Stone of Rhinelander, Wis., reports the case of Mrs. B., aged thirty, whose eczema was the most complete he had ever seen, entirely covering the body. The eruption was bright red, very scaly, with intense itching. He gave mezereum cc. and then a few doses of sulphur. Relief was obtained at once, and she reported well in nine days.

Pulsatilla IN RHEUMATISM.—Dr. Stone also sends us the following verification:

"Mr. R., aged thirty-two, has been troubled

for years by rheumatism. An allopath recently gave him something which removed the epidermis from a place six or eight inches in diameter over the left pectoral region. The only peculiarity I obtained was its tendency to change locations. Pulsatilla cc. effected a cure immediately, which has been tested by very bad weather. I am using pulsatilla more and more in rheumatism, and with eminent satisfaction. Also in dyspepsia, for which the guiding symptom is the feeling of a lump in the stomach."

MEDICAL MEMORANDA.

Aconite versus Ferrum Phos. IN BRONCHITIS OF INFANTS.—Dr. Martin Deschere¹⁴ combats the idea that ferrum phos. and aconite should be given one for another on the assumption that one takes the place of the other. "Homeopathy does not recognize any substitutes; either a remedy is positively indicated or it is not. Now in bronchitis ferrum phos. has acted to better advantage than could formerly be claimed for aconite. The reason is obvious, for it is more thoroughly homeopathic to the prevailing conditions.

Aconite presents a dry cough with great restlessness; the cough is short, hacking, sometimes ringing, worse after drinking water and during the night. The child often grasps at its throat while coughing, indicating local pain. The respiration is labored, anxious, and quick, frequently with cough at expiration. The pulse is hard, full and strong in inflammatory affections.

This symptomatology certainly points more to an acute catarrhal or croupous laryngitis, where aconite takes the first rank.

While similar conditions prevail under ferrum phos., the greater similarity to bronchitis is shown in the short, dry cough accompanied by much rattling of mucus in the chest, both being aggravated during the night. The pulse is quick and full, but round, which rather corresponds to the pulse in children, especially in bronchitis, where it is rarely found to be hard and strong. The mental symptoms and fever are much like aconite. In my experience ferrum phos., has quickly checked many a beginning bronchitis, also in children beyond the age of teething, who had had repeated and prolonged attacks. The potency is of little importance

here, though I have never prescribed it below the sixth decimal.

Creosote IN CHRONIC CONSTIPATION.—It is reported by Dr. Vladimir de Holstein of Paris³⁸ that he has used beech-wood creosote with marked success in chronic constipation, in cases where every other remedy, including abdominal massage and oily inunctions, had failed. The remedy was being used as a last resort with a view to its antiseptic actions in the intestines, hoping thereby to prevent auto-infection, which it was concluded was at the root of the difficulty, in the case of a young chlorotic girl afflicted with very obstinate constipation, and upon whom ferruginous and arsenical remedies had no effect. The surprise was therefore great to both patient and physician when, as a result of the creosote medication, normal daily stools were established, a fact which was later confirmed by observation in other cases of obstinate constipation. The best method of administering the creosote, it was found, was to give it with some diluent, such as milk, beer, wine and water, or water alone. The most efficacious dose was found to be 7 to 9 drops, taken immediately after meals. When the dose was found to be insufficient it was increased. To accustom the patients to the burning sensation produced in the throat by swallowing the remedy, this was given in commencing doses 1 drop, which was increased by 1 drop daily, until the proper results were had. The medication must be continued for several months, and not only overcomes the chronic constipation, but reestablishes the appetite, improves the general condition, and clears the complexion. Under the influence of the creosote, the dejections become quotidian, soft, and abundant, but are unaccompanied by pains or any other symptom of intestinal irritation. The creosote does not act as a purgative, but only by neutralizing an intestinal toxin that, in chronic constipation, paralyzes the intestinal tract.

The Food Commissioner of Ohio has had a druggist in Toledo arrested and fined \$25 for selling an adulterated remedy, namely a catarrh cure which contained cocaine. Let the good work go on!

BAPTISIA TINCTORIA.*

By L. C. McELWELL, M. D., St. Louis, Mo.

TO-DAY I shall talk to you about one of the so-called typhoid fever remedies. Now because I say this is a typhoid fever remedy, I do not wish you to think for a moment that as soon as you diagnose a case as "typhoid fever" you are going immediately to prescribe baptisia, for that would be treating a *disease*; and, on the other hand, I do not want you to think that this remedy will not be indicated in *other* conditions than enteric fever. Be careful to understand that when you get the symptoms, as I shall presently give them to you, you will administer baptisia without special notice of the pathological name of the condition to be cured.

When baptisia is indicated you will find one or more of the following conditions: quantitative and qualitative changes in the blood, which leave it below par, so that its nutritive and eliminative capacities are much decreased. Therefore, there are many symptoms having *fetor* as a characteristic. Unless this peculiarity is present, you will not find this remedy often indicated.

In the beginning of an attack it may be absent, but the rule is that there is offensiveness of all discharges and exhalations of the entire body. Even the hemorrhages that flow from any part of the body will have this character, but particularly those from the bowels and genitalia. With this subnormal blood there is a very greatly lowered vitality and the reactive property of the blood is much abridged, so that there is much exhaustion on the slightest exertion (*ars.*, *lach.*). On account (seemingly) of the altered condition of the hemoglobin, the red corpuscles do not carry enough oxygen to the tissues, the blood is not properly aërated, is very dark, and the venous circulation becomes engorged. The patient complains there is not enough air in the room and either goes to the window or asks that the doors and windows be opened. This is mostly the case after sleep, reminding us again of *lach.*, in the agg. after sleep, and of *puls.*, in the desire for air and the engorged venous side of the vascular system. Should there be hemorrhages,

the blood will be found to be dark or nearly black and coagulating slowly.

There is hyperthermy developed, and it takes the peculiar type and range of typhoid fever, the pulse keeping in a very constant ratio to the elevation of temperature. During the fever there is, oftener than otherwise, delirium, which is very striking because of the ideas that take possession of the patient's mind. There is at first much restlessness and tossing about which the patient endeavors to explain by saying that he is trying to get the different parts of his body together, as it is scattered all over the bed, and which if he could accomplish he could rest easy. Or she thinks herself three persons and worries herself trying to keep them covered.

This last symptom is very much like petrol., which imagines another person lies alongside of him in the bed, or that one leg is doubled. He is prevented from sleeping because of endeavors to entertain this other person (which they occasionally think to be another self and worry about that). *Puls.* imagines in her mania or delirium that a naked man is in bed with her. The face of bapt. has a characteristic stupid or besotted look, which is only seen elsewhere under the influence of *arn.*, *gels.*, and alcohol. There is a duskiess about it that will distinguish it from the latter as well as the absence of the odor of alcohol, while it will be much more difficult to differentiate between the other two. Both *arn.* and bapt. have soreness of the flesh, requiring one to move to find an easier or softer place. Both have the low form of fever, the offensive discharges, and the dry, brown-centered tongue, but the stupor of bapt. seems to be deeper than that of *arn.*, because the bapt. patient will fall asleep or return to his mumbling while answering questions, but the *arn.* seems to be able to finish the answer, but falls asleep or the muttering returns as soon as the will is no longer exercised. With the fever of bapt. there is sometimes deafness, though not like that of *cinchona*, which is because of the *tinnitus aurium*, but there seems to be a genuine paralysis of the auditory nerve. These cases, by the way, are *very* dangerous. *Gels.* is like bapt. in the weakness and drowsiness; but the *gels.* patient can sleep first, last, and all the time.

There is the chilliness capering up and down

* A Lecture before the class of the Homeo. Med. Col. of Mo.

the back in both bapt. and gels., followed by the fever with muscular soreness and aching, so that I should say that it is extremely difficult to detect the difference between the two remedies within the first thirty-six or forty-eight hours, without some of the above mentioned uncommon symptoms peculiar *only* to bapt., so that I would advise that at the beginning of this kind of fevers gels. should be preferred to bapt., as it may be all that is necessary and the case would not be spoiled for the administration of bapt. later if necessary.

Rhus tox. has some similarity to bapt., in that during its delirium or dreams there is the idea that the sufferer was doing some difficult, laborious work, there is restlessness, but unlike rhus there is not a temporary relief from the restlessness, though there is from the sore places. The tongue is brown and cracked and there are sordes on the teeth and gums, but the manner of onset will often be a help to you to select rhus. That patient usually suffers an attack from getting cold while in perspiration, or from swimming during that part of late summer and early autumn called "dog days."

After the mental symptom, the putridity of this remedy is to my mind the most peculiar symptom, and is only competed with by psor. and asafetida. Keep your eyes peeled just a little, and your thinking cap just partly on, and you will not have great difficulty in prescribing baptisia correctly, and when you do, your patient will make a record-breaking recovery as far as time is concerned.

AGAIN THE LIVER.

By E. E. VAUGHAN, M. D., Chicago, Ill.

Surgeon to the Chicago Baptist Hospital, Professor of Anatomy in the Chicago Homeopathic Medical College.

IT is of a comparatively recent date that the human liver was thrown into the arena, to be torn in pieces by the blood-thirsty surgeon and again returned to its rightful owner, with a fond hope that it will resume and continue to perform the functions for which it was originally intended, namely, the excretion of gall, which seems to enter into the make up of the natural man to a greater or less extent; and if I were to judge from some cases which have come under my

notice during my career as a physician, my suggestion would be, rather than the removal of that organ or any part thereof, that science be encouraged along such lines as would lead up to the successful grafting in of an additional liver or two, thereby excreting the excess of gall together with all troubles arising from the possession of the same. However that may be, let us now consider our subject with all seriousness.

It is a fact that during the past few years modern surgery has given to the liver a very prominent position. The reason for this we believe is in part at least due to a more thorough knowledge of its functions and anatomical relations.

Function.—Of its function I will only say that whereas we have been accustomed to look upon the liver as a secreting organ, the secretions of which were necessary to effect digestion, it is now held by good authority that it is rather an excreting organ like the kidneys, and has been demonstrated that for the bile to pass through some artificial canal does not affect materially the digestive apparatus.

Anatomical relation.—Under this head a small book might be written without exhausting our subject; we will, however, narrow it down to as small a space as possible.

The liver occupies the whole right hypochondriac region extending across the epigastric into the right border of the left hypochondriac, its upper extremity, being molded to the arch of the diaphragm, is protected in the right side by the ribs and their cartilages from the seventh to the eleventh, and in front by the ensiform cartilage and the cartilage of the sixth, seventh, eighth, and ninth ribs.

It must be remembered that the liver rises and falls with the diaphragm in respiration, the upper surface of the right lobe reaching as high as the upper border of the eighth dorsal vertebra during forced expiration, and descending to the level of the ninth dorsal vertebra during forced inspiration. Its position also varies in different postures of the body. In the recumbent position it gravitates backward until the lower anterior edge cannot be felt beneath the cartilages of the ribs of the right side, and percussion along its anterior surface will show that the liver extends up to a line crossing the lower end of the

gladiolus in the median line, and on the right side to the level of the fifth and on the left side to the sixth chondro-sternal articulation.

In the adult male, when standing with natural breathing, the lower border corresponds to a line drawn from the eighth left to the ninth right costal cartilages. In the female and children of both sexes this line is somewhat lower. It must be remembered, however, that habitual tight lacing forces the liver downward, in some *extreme* cases to the right iliac fossa.

Next, in the median line anteriorly the liver overlaps the stomach, being closely allied to the abdominal wall at that point. It is also important to note the relations of the liver to the right lower ribs, as in fractures of the same injuries of that organ are often sustained. Punctured wounds through the sixth or seventh intercostal space would involve the diaphragm, open the pleural and peritoneal cavities, injuring both the lung and liver.

The weight of the adult liver is from four to five pounds, measures from right to left ten or twelve inches, anterior post. seven to eight inches, and in thickness about three inches.

The liver is incased in a peritoneal covering except its posterior aspect, where the peritoneum is reflected backward both above and below, leaving that portion of the liver in direct contact with the posterior muscular wall. (The erector spinæ and quadratus lumborum.)

The surgical operations most often demanded are those for the relief of occlusion of the bile ducts from various causes, the most common of which are gallstones, catarrhal inflammation or ulcers about the opening, the presence of worms in the ducts, and pressure caused by the growth of tumors in that region.

The operations employed for this purpose are cholecystotomy, which consists of the simple opening of the gall bladder for the purpose of emptying the cavity; cholecystectomy, which consists of removing a part or the whole of the gall bladder; and cholecystostomy or cholecystenterostomy, the first of which consists in forming a communication through the abdominal wall and the second from the gall bladder to the duodenum. In the year 1867 Dr. Bobbs first opened the gall bladder, and in 1878 Dr. Simms began to practice the same, and the results of

the operations as tabulated shortly after show ten deaths in thirty-five cases.

Since that time the operation has alternated between favor and disapproval, until at the present time we are able to report uniform success in all cases uncomplicated with malignancy, advanced age, or organic disease of some vital organ.

Of the liver proper, the operations required are from vastly different causes and of a different character. Prominent among the conditions calling for surgical interference are abscesses as a result of inflammation caused by traumatic or other influences, the introduction of foreign substances by punctured or lacerated wounds, cystic formations as hydatids, etc.

There is one other condition that I desire to mention, and that is a formation of biliary calculi in the liver substance, and in this connection I have a unique case which I desire to place on record. The case is as follows: Mrs. P. of Kalamazoo, Mich., entered the Baptist Hospital, September 24, 1895. History. Age fifty-five, was married at thirty-four, has given birth to three children, had one miscarriage. Health good up to ten years prior to date of hospital entry. At the time referred to she was, while riding in a carriage, thrown under its wheels, one wheel passing over the right hypochondriac region. Did not at the time realize that the injury amounted to anything more than a slight bruise, and was able to sit up and ride home. The following morning had severe pain in the right side, extending toward the stomach, lasting about two hours, being relieved in part after vomiting freely of bile, and in a few days resumed her normal condition, except some slight soreness at the point of injury.

Three months later a second attack of pain and vomiting, not as severe as before. After this attack others came at irregular intervals, varying as to their intensity, and seemed to the patient to be caused by getting overtired or excited, indigestion, etc., about every six or eight weeks.

The physician in attendance, Dr. Cornell of Kalamazoo, diagnosed the case as passing biliary calculi. However, a careful examination of the stools revealed none, and jaundice never existed. This condition of affairs continued for about nine years, when these attacks began to

grow in intensity with rise of temperature as high as 104° , which would suddenly subside to normal after vomiting. In July of '95 had such a severe attack that her recovery was doubted, and it was determined through the advice of Dr. Cornell to send her to some Chicago hospital for diagnosis and possible operation, provided her condition improved sufficiently to permit her to travel. At this time a tumor was discovered in the abdominal region, thought to be a fibroid. In September the patient was considered able to take her journey, and accordingly entered the Baptist Hospital on the date named (September 24), upon which date the writer made his first examination, which revealed a small tumor about the size of a hickory nut, about one inch below and a little to the right of the umbilicus, superficial in the abdominal muscles, with the right lobe of the liver considerably enlarged, the area of the dullness extending to within one inch of the umbilical line, with an apparent connection between the liver and tumor, over which there was a slight discoloration of the surface. The diagnosis was believed to be abscess or encysted gallstones. The following day the patient was examined by Drs. Thompson and Baines, who were conservative enough not to commit themselves, all agreeing that an exploratory incision was the proper procedure.

Accordingly arrangements were made and the operation performed with Drs. Thompson, Baines, Patterson, and Ousley present. The first incision was made over the small tumor alluded to, which proved to contain a certain amount of pus with nineteen small gallstones, about the size of a grape seed. The incision was then followed up to the liver, just to the right of the median line, following what seemed to be an obliterated fistulous tract. When the anterior left section of the right lobe of the liver was exposed it presented a hard glistening appearance, somewhat simulating a sarcomatous growth. However, the history of the case led us to make an incision over its most prominent part, and a short distance below the surface, about one half inch, was revealed a biliary calculus, which, after it was removed, measured four inches about its greatest circumference, three and one-fourth inches for its smallest cir-

cumference; this rested upon a second stone about one-third its size.

After removing the same, the cavity was gently curetted, the edges of the liver being stitched to the abdominal opening. The hemorrhage being quite free, the cavity was tightly packed with gauze. On the second day this was removed with very little hemorrhage and repacked. Several small gallstones passed from this opening after the second dressing, after which bile began to pass through the opening. The patient made an uninterrupted recovery, was discharged from the hospital at the end of six weeks, the discharge of bile ceasing in May of '96. Since that time there has been an occasional discharge of an albuminous character resembling the white of an egg, which occurs once in three or four days to the extent of about a teaspoonful. The patient's health has been very good for the past year, being able to do as much work as the average woman of her age.

MEASLES, AND THE MATERIA MEDICA IMPURA.*

In St. Louis in 1891-92 the allopaths reported 969 cases of measles, with 65 deaths, mortality 6.7 per cent.; the homeopaths reported in the same time 170 cases without a death. What the allopaths don't know about treating measles would fill a book.

In Cincinnati in 1892-93-94, the allopaths reported 3082 cases of measles with 193 deaths, a mortality of 6.26 per cent. In the same time the homeopaths reported 254 cases with 2 deaths, mortality 0.8 per cent. Our old-school friends say there is nothing in homeopathy. Does the reader think the same could be said of old-school medicine?

In Minneapolis in 1891-92-93, the allopaths reported 1935 cases of measles with 50 deaths, mortality 2.58 per cent.; in the same years the homeopaths treated 458 with 5 deaths, mortality 1.1 per cent. Do you wonder why the old school does not take kindly to comparative vital statistics?

In Indianapolis in 1891-92-93-94-95 the allopaths reported 3105 cases of measles with 27

* With apologies to Dr. Richard Hughes.

deaths; the homeopaths 545 cases without a death. Why is it that allopathic measles are so much worse than homeopathic measles?

In Denver in 1891-92-93-94-95 the allopaths reported 316 cases of measles with 51 deaths; the homeopaths in the same years reported 83 cases with 3 deaths. At the same rate 40 of the 51 deaths were unnecessary. Will people ever learn that old-school medicine does not compare with homeopathic in the cure of diseases?

In all cities from which statistics were gathered from 1891 to 1895, inclusive, the allopaths reported 18,425 cases of measles with 735 deaths, a mortality of 3.99 per cent.; the homeopaths reported 2758 cases, with 22 deaths, a mortality of 0.8 per cent. At the same rate the homeopaths would have saved 588 of the 735 cases lost by the allopaths. None are so blind as those who *will not* see.—*The Critique*.

So? If these statistics be true—and who dare dispute them?—then the Baltimore Club's scientific *Materia Medica* is not yet in order. For we make no doubt that the great majority of these measles cases were cured by remedies which have no "scientific" standing in the pathogenetic wing of homeopathy: why, then, muddy the stream?

CLINICAL REPERTORY AFTER DR. CIGLIANO'S PLAN.

By DR. EDWARD FORNIAS.

(Continued from page 79.)

FLATULENCE. 1. Carb-v., cham., chin., lyc., nux-m., nux-v., puls. 2. arg-n., arn., calc., cocc., colch., graph., ign., lach., nat-m., nat-s., nit-ac., olean., phos., sep., sulph., sil., zinc.

Pr. acids: carb-v., phos-ac.

confinement: nat-s.

delivery, with labor-like pains: nux-m.
drinking: nux-v., chin., cocc., ferr., verat.

eating: carb-v., lach., lyc., nux-v., puls., sulph.; the least bit of food: sep.
getting wet: rhus.

unpleasant mental emotions:
nux-m.

supper: puls.

Ql. abundant: carb-v., chin., lyc.

circumscribed—*in the epigastrium: carb-v., graph., lyc., nat-m.,

nux-v., puls., rheum.—*in the left hypochondrium: aur., cham., euphor., lyc., nux-v., sulph., verb.—*in the right hypochondrium: euphor., podo., verb.—*in both hypochondria: cham.—*in the rectum: glon.—*in the umbilical region: colch.—*in the uterine region: tarent.

incarcerated: calc., carb-v., cham., chin., cocc., colch., coloc., graph., k-bich., lach., lyc., nat-m., nat-s., nit-ac., nux-v., plumb., phos., raph., sil., staph., sulph.—*in the inguina: cham., lach.—*in the upper abd.: nit-ac.; R. S. more toward back, with pinching pain: carb-v.—*in the L. S.: carb-v., iod., ferr-mag., sulph.; with constipation: aur., iod., lyc., rhod., sulph.—*in the R. S.: æthu., bism., nat-s., podo., zinc.—*in the umbilical region: anac., lach., tart.—*in the rectum: nat-c.—*beneath the ribs: aur., phos.—*beneath the short ribs: canth., carb-v., nux-v.—*collects here and there, under the short ribs, or in hypogastrium: carb-v.—*rolls about, from place to place, and becomes incarcerated: nat-s.—*shifting from place to place: puls., sil.—*while lying down: phos.; in bed: zinc.—*when sitting: lyc.—*when waking: sil.—*while walking: rhus.—*with colic: coloc.; in the evening: puls.; and retracted abd., knots in recti muscles: plumb.—*with constipation: nux-v., plat., sil., sulph.—*with cutting in lower abd.: sil.—*during dentition: calc-ph., cham.; with green, sour stools, A. M.: podo.; with cold abd.: calc-c.; with hot abd.: sil.—*with diarrhea: carb-v., chin., lyc., mur-ac., nat-s., sabin; during dentition: calc-ph., cham.—*with distention and megrim: calc.—*with distress about the heart: lyc.—*with knotty swellings, here and there in the abd.: nat-c.—*with nausea: kalm.—*with oppression: carb-v., puls.; of chest: phos.—*with pressure: upward, and downward on the rectum and bladder: lyc.

—***vertigo**: calc.—*< from tight clothing: lyc.—*not > by eructations: chin.—*> by eructations: carb-v., lach.—*> by passing wind: asaf., carb-v.; up and downward: carb-v., sulph.—*< mornings and evenings: nit-ac.—*< from least food: carb-v.—*in the morning: rhod.—*afternoon: nice.—*evening: graph., lyc.—*night: nat-m., puls., sil.—*moving about: aloe., carb-v., nat-c., nat-s., ol-an., phel., puls., rhus-t.—*before diarrhea: tabac., tilia.—*painful: puls.—*day: ox-ac.—*morning: arg-n.—*evening: lyc.

painful: arn., lyc., nat-c., nat-s., puls., rhodo.—*colic-like: asaf., aur., bell., caps., carb-v., cham., chin., cocc., colch., coloc., coni., grat., lyc., mez., nux-v., phos., puls., rheum.; mostly around the navel: coloc.; in hypogastrium: acon., chin., phos., sulph-ac.; with protrusion of colon, > by pressure and leaning forward: bell., coloc.—*cutting: coni., puls.—*drawing: chin.—*gripping: anac., asaf., aur., graph., nat-s., rhus, tart-e., teucr.

pressing: casc., chin., nat-m., nux-v., puls., rheum., sulph.—*on the bladder: ign., nux-v., prun-s.—*forward: sulph. — *upward: cocc. — *on uterus: sol-t. ae.

rising up: graph., lyc., nat-n., rheum., and becoming fixed under short ribs: nux-v.; seems to rise up into chest: rheum.

rolling: acon., agar., agn., aloe., ang., ant-c., ant-t., arg., arn., aur., berb., bism., bov., bryo., calc., canth., carb-an., carb-v., caust., cham., chenep., chin., coloc., coni., cop., cycl., elap., ferr., glono., graph., grat., guaj., gum-g., hell., hipp-m., ign., jatr., k-jod., lachn., laur., lyc., mag-c., mag-s., meny., merc., mez., nat-ac., nat-c., nat-m., nat-s., nit-ac., nux-v., olean., ol-an., ox-ac., paris., petr., phos., phos-ac., plumb., puls., rhodo., rhus, sars., scill., sec., sep., sil., spig.,

staph., stram., sulph., sulph-ac., tabac., tereb., teucr., thuj., verat., zinc., zing. shifting: aloe., puls.—*with gurgling: tabac.—*with rumbling and diarrhea: tart-e.

squeezing: carb-v., teucr.

thumping against navel: agar.

tightening: chin., graph., rheum., rhodo.

urging: plumb., seneg. (aloe.).

in children: cham.

in gouty person: lyc., zing.

in hysterical women; asaf., colch., ign., puls., tarax.

Md. in the open air: plant.; walking: sep.

defecating: aga-m., apoc., crot-t., gran., nat-m., phel., staph.: only hot flatus passes: aloe.

lying down: phos.

riding in a carriage: ferr.

Md. rising from bed: zinc.

sitting: phos., zinc.

sleeping: kali-n.

urinating: merc.

waking: lycoper.; in the morning: arg-n., cist., rumex.

walking: lyc.; in the open air: sep.

Cn. anxiety: cic., nux-v.

bowels contracted: china.

breathing difficult: carb-v., mez., puls.

chilliness: mez.

colic: aster., coloc., nux-v., puls., verat.

constipation: bor., carb-a., caust., sulph., tel.

diarrhea: coloc., sabin., staph., zinc.; tendency to: psor.

distention, great: carb-v., chin., graph., lyc., nux-m., raph., robin.

eructations: grat., rhod.

gripping: asaf., coloc., graph., nat-s., puls., rhus., tart-e.

headache: calc-ph.

menses: k-carb., vesp.

oppression of chest: phos.

palpitation: podo.

peevishness: cic.

rumbling: sec., sil.; loud: caust., mez., nat-c., puls.

- spasms : prun.; of stomach : collin.
Agg. when bowels move : nat-ars.
 coughing : cocc.
 exercise : nat-n.
 least food : carb-v.
 lying : phos.
 after meals : nux-v., rhus.
 mornings and evenings : nit-ac.
Am. bending forward : bell., coloc.
 emission of wind : carb-v., nat-m.,
 nat-s., verat.; upward and down-
 ward : carb-v., lil-t.; downward : lyc.
 eructations : carb-v., nat-n.; empty :
 lycop.
 pressure : bell., coloc.
 stool : hyper.; hard : carb-v.
Cs. acids : phos-ac.
 bath : calc-s.
 drinking : nux-v.
 fat food : carb-v., *puls.*
 fruit : chin., *puls.*, verat.
 meat : bryo., lyc., verat.
 milk : carb-v., merc-c., sulph-ac.
 tea : calc-s., hyper.; much : china.
 water, cold : ant-c., bell., calc-ph.,
 ign., lyc., nux-v., *rhus-t.*, sulph.
Tm. clay : lyc., nat-m., pic-ac.
 morning : asaf., ced., eupho., hep.,
 lyc., merc., nat-c., nit-ac., nux-v.,
 phos., rhodo., tarant.—*in bed : nux.
 —*on waking : arg-n., cist., rumex.
 —*before breakfast : agar-m.
 forenoon : hipp.; walking : nat-m.
 noon : nat-s.
 afternoon : aur., calc-s., carb-v., nitr.,
 opi.—*after eating : fago.
 evening : aloë., am-c., apoc-c., hyper.,
 lyc., nat-m., nit-ac., pic-ac., *puls.*, *sep.*,
 verat., zinc.—*before lying down :
 merc., nux-v.
 night : ambr., arn., calc-s., carb-v.,
 cocc., ferr., ign., lyc., merc., nat-m.,
 nux-m., opi., *puls.*, *sulph.*, thuj., zinc.
Sb. evacuations : aloë., ars., cact., caps.,
 carb-a., carb-v., chel., cocc., gels., grat.,
 iris., k-carb., koba., lach., lept., mag-s.,
 merc., mez., mur-ac., nat-s., olean.,
 phos-ac., *puls.*, rat., sec., spong., sulph.,
 thuj., tilia.

(To be continued.)

BETTER THAN SKIN GRAFTING.

D^{R.} E. B. HAMPTON of Rush, N. C., in the *Medical Brief*, gives the following prescription for restoring the skin, where it has been destroyed by disease, in lieu of the painful and troublesome operation of skin grafting :

R Antifebrine..... 3 grains.
 Vaseline..... 1 ounce.

M. To be thoroughly rubbed up and applied topically.

He says he had a case of phlegmonous erysipelas of leg, which was bared of nearly all the flesh from hip to foot. After the flesh was restored, they were considering the subject of skin grafting, but just at that time, he noticed this prescription in the *Brief* and was thereby saved all farther trouble in the case. It answered the purpose.

CYCLING AND THE SADDLE.

I^NJURY of the prostate gland and the prostatic urethra from riding a faulty saddle is one of the most deplorable results that can follow the fascinating practice of cycling; likewise an improper saddle, by permitting pressure and irritation of the external genitals, sometimes develops the habit of masturbation in girls. With these elements of danger eliminated, it is by far the most popular and beneficial form of outdoor exercise we are acquainted with.

The physician who thoroughly masters the saddle question, both from a scientific and practical standpoint, and advises his patients and patrons accordingly, may render them a very great service.

FADS.

T^HE editor of the *Southern Clinic* waxes sarcastic under the above caption. It is very common, he says, to find cases relegated to a certain line of treatment, with the expectancy of death against them, in full accord with public sentiment, simply because a hasty diagnosis places them in the list of dangerous, incurable, or surgical maladies. There are none more striking than those of appendicitis. We may say it, without fear of contradiction, that the many cases of common old-fashioned belly-ache, fecal impaction, and wind colic, are diagnosed,

treated, and passed to the other side under the name of appendicitis. The housewives and grannies of years ago used to beat this record badly, and we trust that some of our friends may again return to the wisdom of their grand-mammies and the further saving of human life by simples.—*Ex.*

THE LIBERAL HOMEOPATH.

WHO is a Liberal Homeopath? It is one who employs all of the art known to Homeopathy; one who is not afraid or ashamed to use the highest potency and to avow its successful administration; one who has no fear of ridicule when he dips into the 3x or the 6; who sticks closely to the homeopathic law as given by Hahnemann; one who is not ashamed to admit that he uses but a drop of the 30th or the 200th in a glass half-full of water, a teaspoonful every two or three hours, in the cure of dangerous diseases; one who does not alternate his remedies, and does not use combination tablets; one who does not give an hypodermatic of morphine to allay present pain and something else *at the same time* to cure the patient; in short, one who will adopt every reasonable means to cure his patient, and be able, after it is done, to tell what course he pursued and the reason therefor so that others, seeing his good works, may go and do likewise. *That*, in our estimation, is a Liberal Homeopath! If the homeopath has imbibed the surgical trend, he may dabble in current chemical discoveries of the other schools, in order not to put himself under the ban, in a mechanical operation, of having neglected to apply the very latest SCIENTIFIC advances to his case; but this does not hold as to disease *per se*. Let us not forget that the diploma reads "Physician AND Surgeon"; and that the first paragraph of the Organon clearly enunciates the physician's highest and only calling.

The Railway Medical Contract Practice, so ably shown up by *The Critique*, is feebly imitated in Cleveland, by contract practice with private families. One man who uses seven horses and cuts a wide swath is noted for this practice; and a female doctor also makes no hesitation about entering upon such contracts at any moment.

NO HOMEOPATHIC ABNEGATION!

IN closing [said President Eugene H. Porter of the New York State Homeopathic Medical Society, in his Annual Address recently delivered at Albany], I wish to refer to that somewhat remarkable invitation recently extended to us by the distinguished president of the New York County Allopathic Medical society. He says: "If they will but drop the sectarian title for that of physician pure and simple, and let the 'old' and 'new' school questions die out, I am sure we will welcome them with open arms, as we have received a great many of their practitioners during the past few years who have declared their abnegation of sectarian principles and practice." I believe, as I have said elsewhere, that invitations to abnegation are neither courteous nor wise. But to those who preaching a specious tolerance, a deceptive non-sectarianism, who, "progressing from conciliation to concession, from concession to abnegation, would sell their honor for the flesh pots of allopathy, to these weak-kneed brethren, these rags and tatters, these remnants of virility, these men of blubber, I would say that the age of credulity has given place to the age of reason, and that the principles of the school and the name upon its banner must be nailed to the mast, not to be removed until the surrender of the enemy.

I define a homeopathic physician as one who adds to his knowledge of medicine a special knowledge of homeopathic therapeutics. All that pertains to the great field of medical learning is his by tradition, by inheritance, by right. The difference between the schools to-day is as great as it ever was. There will be courtesy and fairness, but no abnegation. The true policy of the homeopathic school is the development of its resources; the avoidance of any alliances that may in any way be derogatory to its honor or dignity; an uncompromising attitude toward allopathy; a cultivation of that stalwart spirit and fiery energy that characterized the pioneers; the strengthening of our institutions; the proving of drugs; in short, the advance of homeopathy in the only way in which it will ever be advanced, by the loyal and faithful work of homeopaths for homeopathy. "So we will labor that what came to us as seed shall go to the next generation as blossom, and

that which came to us as blossom may go to them as fruit."

SIGNS OF SPRING.

AS the Ides of March approach along the horizon there is becoming manifest the usual bustle in college circles, preparative of the graduation exercises. Last years' mortar-boards and motherhubbards are being taken out of the camphor-and-moth-ball environment, and sent in for the Medical Loan Exhibition. The preacher-made faculty address is fished from the barrel, the dust carefully dusted off, and its impromptu effects cautiously revamped and rehabilitated for the newer occasion. We will be severely disappointed if we nowhere find that THIS college, this year, is graduating one of the finest and most remarkable of all the classes in its long history of classes, in that it is especially notable for its wonderful intelligence, strength of character, Christian fortitude, as well as its general rowdylessness. And the impressive occasion will be made duly and truly impressive, when the time-stained presidential address counsels, by all the greater and lesser gods of history, medical or otherwise, that the new graduate now before us, gird on his resplendent armor,* and that thus panoplied and caparisoned round about he wield his Puissant Sword in defense of the Great Principles of Right and Justice. That he should be ever noble, with his face Resolutely turned to the Sun, Proud and Strong in the Consciousness of his Duty to Posterity and his Alma Mater! Then he—this first-prize, blue-ribbon, and gold-medal graduate—will locate in some out-of-the-way, two-by-four village, and starve half to death while trying to forget the flour-barrel full of book-made theories with which his cherishing mother has loaded him down withal. And so the merry, merry dance goes on. Each year there comes up out of the land a newer and later horde of medical aspirants and hope-to-be gynecologists. Yet in New York, intelligent, educated physicians have abandoned the practice of medicine and taken to street-car motoring and conducting for a haphazard livelihood!

* I e., the Oxford gown and mortar-board.

Globules.

Dr. E. V. Van Norman notifies the profession of his removal from San Diego to 545 South Broadway, Los Angeles, Cal., with residence at the Hotel Westminster.

A certain alliteratively advertised constipation curer makes the claim, like a farmer's corn field or money out at interest, "they work while you sleep," all of which would seem to be somewhat inconvenient for their user and very troublesome to his chambermaid.

Dr. H. S. Blodgett, Cambridge, Mass., announces his intention to retire from general practice, and after spending a month traveling through the South, to make his home at Lincoln, Mass. Later he will devote his time to the treatment of urinary diseases, having an office in Boston.

We sincerely trust that the three "eminent" ministers of the Gospel, whose group picture appeared recently in a Chicago daily, together with the usual laudations of some quack nostrum, and the mayor of Hartford, who was also restored by one of these medical corporations so that his almost life-size head and face appeared in every prominent daily of the land, will now be able to marry again, following the illustrious footsteps of the illustrious Talmage.

The *Medical Counselor* has taken to itself a partner in the editorial chair, in the person of Dr. W. B. Hinsdale, formerly of this city, but latterly and now Dean and Professor of the Homeopathic Department at Ann Arbor. Needless to say that this is a good addition to the *Counselor's* staff, and that the current number already shows lines of improvement. The *Counselor* company has been organized with the following officers: Dr. C. C. Miller, president; Dr. R. C. Olin, vice president; Dr. C. G. Crumrine, secretary; Dr. R. M. Richards, business manager, with Drs. Knight and Hinsdale as editors.

The Ann Arbor Homeopathic Medical College will give a series of surgical clinics at the Homeopathic University Hospital. There will be general surgical, gynecological, and ophthalmological operations. These will begin on April 12 under the direction of Professors Le Seure, Kinyon, and Copeland. The evenings will be made valuable to the practitioner by demonstrations with the microscope, methods of bacteriological and pathological examinations, use of the stomach tube, and, if desired, a lecture or two on materia medica. This course is free to all practitioners and students of medicine.

The Health Department of Dubuque, Ia., presided over officially by Dr. E. A. Guilbert, has issued a Statement of Mortality for the month of January, 1898, which represents a very creditable showing. Dr. Guilbert has divided his report of Causes of Death into five divisions: namely, occurring from zymotic, constitutional, local, development, and violent causes. With a population of 45,000, the death rate per annum for 1000 was but 6.90. In other respects this little circular shows the methods of a very efficient and painstaking official.

A widow of years of experience (having safely buried three husbands, and now again considering the necessities of the case) said that she liked a certain persistent, aged suitor, but he had had two or three attacks of bluemonia, and lately had undergone an operation for phimosi—she thought that was the name of the disease—or some such little thing like that. Did her family physician, to whom she was making this communication, believe that this sixty-four-year-old suitor would be a proper party for the said aforesaid bereaved and disconsolate one?

Dr. Victor von Fink of Dallas, Ore., writes to this editor for a good remedy for an indigestion based presumably upon a kidney lesion. No trouble at all with the eating or drinking or sleeping. Patient also has been diagnosed as having mitral insufficiency. Dr. von Fink says that an old-school physician recommended the use of calomel, strychnia, iron, iodine, and arsenic. What amused Dr. von Fink was the air of sincerity with which this allopath gave his dictum, as if he really believed it; as if the treatment of any of the ailments to which humanity is liable was the veriest child's play.

Some hope is entertained by the Hahnemann Monument Committee that the Gorham Company (which has cast the statue of Hahnemann as it will in time be placed in position in the Washington monument)—it is hoped that this company will send that bronze statue of Hahnemann to the Trans-Mississippi Exposition at Omaha as one of the art exhibits; and if so, it will be put in a prominent place, on a temporary foundation, but a copy of the original. This would attract the attention of the laity as well as the profession, thus adding to the standing of the homeopathic profession, so that it may with good grace appeal to the wealthier of the laity for funds to complete this noble structure and its placing it in the nation's capital.

At the recently closed annual session of the New York Homeopathic State Society, held at Albany, the following officers were elected: Dr. A. B. Norton of New York, president; Dr.

DeWitt G. Wilcox of Buffalo, first vice president; Dr. Adrians of Elmira, second vice president, and Dr. H. D. Schenck of Brooklyn, third vice president. Those tried and true and many-times elected secretary and treasurer, Drs. John L. Moffatt and Charles Deady, were again returned to their customary posts. Dr. W. S. Garnsey of Gloversville was re-elected necrologist. Drs. A. R. Wright of Buffalo, F. F. Laird of Utica, Edwin Chapin of Brooklyn, and Willard N. Bell of Ogdensburg were elected members of the State Board of Medical Examiners.

There is no scientific proof that grape seeds are any more dangerous than the hundreds of other small objects which we daily swallow with our food.

It is decidedly encouraging to read the annual address of President Eugene H. Porter, delivered before the recently adjourned New York State Homeopathic Medical Society at Albany. From beginning to end it is the clear and cogent statement of a master in the subject: Homeopathy. There is no weakness, no namby-pamby sentiment, no truckling to the modern scientific craze, no overt act looking toward the reconciliation between the schools—on the allopathic plan—no lusting after the few remaining fleshpots of the old school. Everywhere there is the firmness of honest conviction, and the steadfast reliance upon a duty well done. But, on the other hand, neither does Dr. Porter go out of his way to throw stones at sleeping dogs. There is nothing flippant or jingo about his address. It is a masterpiece of English, logic, good hard common sense, and homeopathy.

We are assured by Dr. W. H. Hanchett and other members of the Omaha committee that no fear need be entertained but that the capacity of the hotels of that city will be ample for all the demands of the Institute. There may be some of our best members who have been to Europe a few times, but have never been west of the Mississippi River until they went to the Institute at Denver, and who therefore have had the thought that Omaha is a small town on the outskirts of civilization. A cursory reading of some of the literature which is being issued by the Exposition Company, after deducting a fair margin for exuberance of spirits, will convince anyone that it is a large city and that the Exposition is second only to the World's Fair; and that even here, in many details, it surpasses the Fair. At any rate, it will be a beautiful picture and one which no good American can afford to miss. It will be well, however, not to defer engaging rooms until the best rooms are taken. It costs but a postal card.

In our Book Review notice we neglected to add that Dr. Bray's *Materia Medica* costs \$3 a copy.

More than forty victims of the cocaine habit, largely induced by the use of popular preparations, as catarrh cures, etc., appeared in the police courts of Chicago within two months of last year.

Says an exchange: An Indiana man took thirteen liver pills by way of bravado; the violent purgative "telescoped" his intestines; physicians could give no relief, and he died in great agony.

It has been announced, as the result of Professor Von Voit's researches, that the extracts of meat are very poor in nutritive value, and that their action is almost entirely a stimulating one, due to the alkaloids.

Recently a Parisian daily reported an operation in which the surgeon, whose name was printed, "cut open the stomach and deftly removed the bullet that lay embedded between the right and left kidneys, below the bladder."—*Clinical Recorder*.

In the year 1890 the manufactories of patent medicine in the United States sold their products for \$32,622,123. Now if the retailers doubled the price to consumers, as is most probable, then the people of this country paid very dearly for their guzzling of patents.

Attention has been attracted to a suit which was instigated by the authorities at Washington against Dr. Wm. C. Boteler, for certain charges appearing in his journal, against Mulford & Co.'s products. We now call attention to a denial of these charges as well as to an open apology for the same, by Dr. Boteler.

A young man of Rahway, N. J., whose weight had decreased from 145 to 90 pounds, and who was being treated for consumption, coughed up a live frog three inches long, which is in the possession of the physician, who suspects the presence of other batrachians somewhere about his patient.—*Ex.*

Ann Arbor Homeopathic School has enjoyed a year of unusual prosperity. The attendance, although small as compared with other departments, was much larger than the year previous, nearly double in fact. The year gave promise of the increasing prosperity of the present year. The Department is now well under way. It has an able faculty, is free from internal discords, and with the aid of the extensive laboratories of the University and its well-equipped hospital, it certainly furnishes to its students a professional education that is not second in completeness and thoroughness to that

given by any homeopathic school in the country. The books of the superintendent show that the hospital patronage in this Department last year was greater than ever before, and that the hospital came nearer paying running expenses than ever before. The new and increased facilities given by this Board in the way of a pharmacological laboratory for the proving of drugs are fully appreciated by the Department, as are the additional advantages that have been provided for in pathology, clinical dermatology, and obstetrical clinics. The training school for nurses, established in connection with the Homeopathic Hospital, had a successful year and is doing good work.—*From the President's Report for 1897.*

Dr. Emily V. Pardee having retired from general practice is now prepared to admit a limited number of patients to her home for care and treatment. Address the Doctor at South Norwalk, Conn.

A well-known clinic for diseases of the skin was recently visited by a heavily jeweled female. After she had taken off even her elegant silk underwear at the professor's request, he demonstrated to his class the devious paths of the itch-insect. When the patient asked what she was to do for her trouble the professor told her to consult a physician and pay him for his services.

James.—No, James, we cannot tell you "of any antiphlogistic that will remove the flavor of onions." The only remedy that we think might prove efficacious would probably be gum asa-fetida ̄i, garlic ̄vi, neatsfoot oil and petroleum each 2 ounces. Moisten with the oil and chew the whole quantity. But this is not an antiphlogistic. Sorry we cannot oblige you, James.—*Clinical Recorder*.

The Operative Itch.—This is a peculiar form of pruritus which is apt to attack members of the medical profession only. The bacillus of this disease, viewed under the microscope, resembles a human hand; each finger, however, being a scalpel and the thumb a pair of scissors. I speak of it only as it occurs in the realm of nose, throat, and ear diseases, although my confrères in other lines of practice will readily distinguish it as it occurs in their domain. Like all other forms of itch, it requires vigorous measures to thoroughly rid each special line of practice of this troublesome parasite.—*Clinical Chronicle*.

WIT AND WISDOM 'a new department' see page X.

The American Homeopathist.

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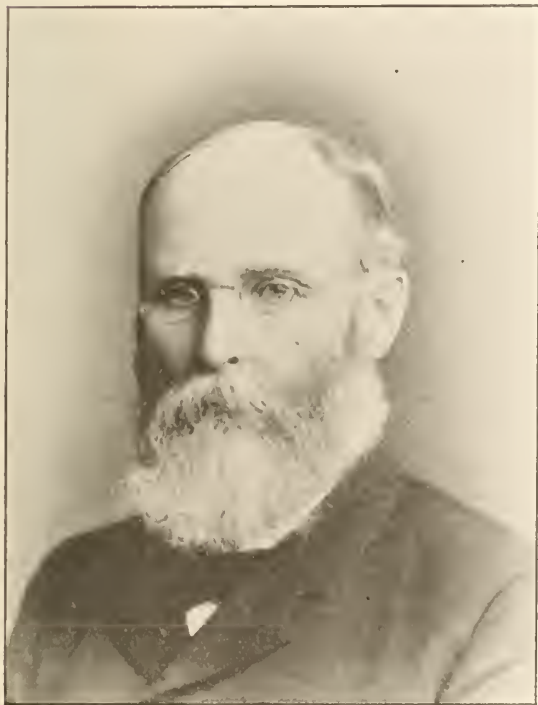
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The American Homeopathist.

NEW YORK, APRIL 1, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



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"SHALL WE LET THE BARS DOWN?"

UNDER this heading a number of letters have appeared in the *Western Medical Review* of Lincoln, Neb.—the original discussing the feasibility of the Allopathic Medical Society of Nebraska admitting to membership other than allopathic practitioners.

ONE of the letters was so ungenerous in its treatment of homeopaths that Dr. B. F. Bailey of Lincoln made a short answer, calling

upon the masked correspondent to come from behind his incognito and show his hand. This resulted in Dr. J. Lue Sutherland appearing over his own name and asking Dr. Bailey seven questions, in which all the hackneyed arguments of the last century against homeopathy are skillfully interwoven with much ridicule of the system. Dr. Bailey answers these questions carefully; but the editor, without permission, leaves off the most important part of Bailey's communication—the testimony of prominent allopaths here and elsewhere as to the value of homeopathy and its minute dosage—but carefully prints Sutherland's answer to that letter, and in full! In this *final* answer Sutherland is loaded to the gunwales with Jahr, Hahnemann, Hering, the Organon, etc., etc., selecting, of course, only such parts as are suited to the purpose of the writer; quoting all that flimsy nonsense about a drop of medicine in the Atlantic Ocean, stilling hunger by smelling a soup-tureen, giving a stone to cure calculus, and so forth and so forth. But the proof of the pudding—the effectiveness of homeopathic treatment, its adoption by many regular practitioners and teachers, and its daily employment by millions of intelligent people—that the editor did not deem of sufficient importance to print—for lack of space. So that as the matter was left standing by the ukase of the editor, homeopathy does nothing but give infinitesimal doses for imaginary ailments.

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IT is very apparent to anyone reading Sutherland's last letter that he had help in the collating of his data: it shows that precision of domestic detail known only to members of a household. And this detail was most likely given by the editor of the *Western Med. Review*, who, we are informed, is a graduate of the Chicago Homeopathic College, but who threw aside his homeopathic allegiance and entered the camp of the allopaths. Therefore, the editor, knowing the truthfulness of Dr. Bailey's position in relation to the value of homeopathic data, is all the more guilty of willful suppression of facts, in refusing to print those facts.

FOR the rest, homeopathy will perhaps suffer but little from the attack of Sutherland and his apostate-homeopath. Few intelligent people of this age listen to the old ridicule of homeopathy. It is a noteworthy fact, they think, that it cures their wives and children, and it matters but little to them whether it is water or drugs which effects the desired end. They are not concerned with the theories advanced by either side.

* *

BUT it is most singular that a man of Sutherland's erudition should so willingly close his eyes to such palpable facts as the constant increase in homeopathic colleges, hospitals, dispensaries, practitioners, and patients. Does he mean to say that New York allopaths are not the compeers of those in Nebraska and other States for intelligence and "push"? And yet in New York, the homeopaths have equal recognition in the State Examination Board, as they have also in Pennsylvania. Massachusetts has had a State allowance for its homeopathic institution. And "the woods is full of 'em," facts—concrete facts—proving that homeopathy is something besides the smelling of a soup-tureen, or giving brickbats for calculus, or feeding on air from a ten-acre lot. And then there is that comparative-mortality fact. Even Dr. Sutherland will not dare deny these statistics. They are *invariably* in favor of the homeopathic practice. This is not a generalization; his homeopathic Iscariot can easily cite him the actual tables.

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DR. BAILEY had a good answer prepared: in his magnanimity he said nothing about the old school's therapeutical treatment for centuries; he did not ask Sutherland why he no longer used one hundred and twelve ingredients in one prescription; why he no longer bled and purged every patient he came to; he did not cite the many historical instances of old-school malpractice. He might with equal propriety have called for a reason from Sutherland why he dared to give less medicine than his brother practitioner of fifty years ago. But it doesn't matter. The allopaths will NEVER admit that there is anything in homeopathy but the soup-tureen and the brickbats. Some people can't see through a millstone, even if it hung about their necks. But an editor should be fair, or resign his shears.

In Russia when coffins are covered with cloth the color of the covering is, to a certain extent, distinctive, pink being used when the deceased is a child or a young person, crimson for women, and brown for widows; but black is in no case employed.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West
Eighty-fifth Street, New York.

References in this department are made by number.
See issue of January 1, or December 15, of each year.

Lachesis IN GANGRENOUS AFFECTIONS.—

Dr. Lambrechts, fils, of Antwerp reports¹²⁰ how he treated a young man of twenty-eight years who, strong and robust, developed a particularly grave form of typhoid fever. Although various homeopathic remedies were prescribed he continued to become worse and worse. On the fourteenth day intestinal hemorrhage set in, to be followed by profuse hematuria, which under ham. and acid. phos. decreased somewhat, when suddenly his penis swelled and became œdematous, and a blackish, shining spot appeared on the dorsum, which extended rapidly toward the glans, accompanied by the horrible odor characteristic of gangrene. The mortified parts were detached, thus exposing the glans and a part of the corpus cavernosa, which were covered with small and grayish ulcerations of a bad appearance. Antiseptic dressings of iodoform, after irrigation with a solution of carbolic acid, were applied. Eschars forming on the sacrum were also thus dressed. Under the influence of lachesis the gangrenous process was arrested. The patient, who was in a desperate state, with scarcely the breath of life left in him, improved considerably; the sacral ulceration cleansed itself and healed rapidly; the penile ulcer took on a healthier color and healed in fifteen days; his tongue cleaned up, his strength returned progressively with his appetite, and to-day he is in perfect health, and, beyond a circumcision, he presents no sign of the terrible danger which he ran.

While dressing this same case the writer accidentally inoculated a slight wound of his left index finger with the ichor from the penis. Though he immediately washed it antiseptically, the next day there were lancinating pains in the finger which progressively extended to the hand, forearm, and became so aggravated that he could not sleep the following night. The wound swelled and was bluish, livid, and of bad appearance. Under lachesis 6x the pains

decreased considerably and abundant suppuration set in, the swelling decreased, and in ten days it healed completely, leaving a linear cicatrix which is now visible.

Symptoms in Therapeutics.—Dr. Chas. H. Evans² discusses the apparently conflicting symptoms seen in the same case or drug proving. He shows that every process in the body is governed by two sets of nerves, as, for example, motor and inhibitory, whose influence in health is perfectly balanced. Either natural or drug disease upsets this balance, and then symptoms of both kinds follow each other in a definite sequence. The disease symptoms in their consecutive order form the natural history of disease; the sequence of symptoms induced by drugs show a similar order of development and succession.

Dr. Evans claims that it follows from the origin and sequence of symptoms having opposite characters, physiologically and pathologically, that the claim that homeopathy is the law of cure is invalid unless the consecutive order of these two sets of symptoms were not recognized as an essential factor in the choice of a remedy.

Lobelia IN SPASMODIC CROUP.—"The Country Doctor"³ says: Years ago I used to dread a case of spasmodic croup as much, or more, than anything else. In real aggravated cases the sight is really dreadful, although the percentage of fatality is, of course, very low. However, since I took up the use of lobelia all dread and fear has vanished. That is ten years ago at least, so you will see that it is no new-fangled notion. I always carry in my case a vial of a preparation of my own make, made from the fresh plant, but I suppose that B. & T.'s lobelia infl. ♀ would answer just as well; and whenever I get a case of spasmodic croup I give it freely. For a two-year-old child I average about seven drops to a dose, in a little sweetened water, and repeat every three or five minutes, until the child is relieved or vomits, which result is obtained in less than fifteen minutes. Then leaving a somewhat weaker mixture, which I order given whenever the "whoop" again appears, I wend my weary way home again for the night, and as a rule no further attendance is needed. I have compared this treatment with

other physicians of all schools, allopathic: alum, sulphate of zinc, etc., and homeopathic: spongia, belladonna, et al., but none appears so certain, sure, speedy, and harmless.

Mistletoe (*Viscum Album*) IN LABOR.—Dr. E. M. Holland⁴ reports four cases in which mistletoe, 30 drops every twenty minutes, seemed to hasten normal labors without any drawbacks. One case will suffice:

"On the 14th day of July of the present year I was called to attend Mrs. B. in her third labor, some two miles in the country. I left home at 3.30 A. M. When I arrived at the house I found nothing to indicate that I would be permitted to return home sooner than—I will say a number of hours. I found presentation all right, some dilatation, but there was but little advancement. The pains seemed to be of excruciating character, but not the kind to do more than to wear the patient out. She told me that the same kind of pains had been on for a day and night, so I continued with the mistletoe in half-teaspoonful doses every twenty minutes. Pains came on; in just one hour her extreme agony ceased. Labor came on, and in half an hour more the child was born.

"In all these cases the placenta came readily and everything progressed well after birth. I said I left my office at 3.30 A. M., and I was at home again by 7 A. M. It may be that four cases are not sufficient to decide on the merits of a remedy, but the change was so decided and prompt that I am satisfactorily convinced that in mistletoe we have an oxytocic that is superior to all remedies hitherto tried."

Nitroglycerin AS A HEMOSTATIC IN HEMOPTYSIS.—Dr. Lawrence F. Flick⁵ has had an interesting experience in the use of nitroglycerin. A patient apparently about to die from a hemorrhage which the usual old-school treatment of opium, ergot, tannic and gallic acids, ice, and salt failed to check caused him to question the cause of the hemorrhage. Answering that it is constriction of the blood-vessels and the application of too great a force from behind, he reasoned that it was unwise then to add more force from behind and further constrict the blood vessels. He determined to experiment with dilatation, and gave nitroglycerin, one-half drop of a 1 per cent. alcoholic solution every half-

hour. The hemorrhage stopped with the first dose and did not recur. In three other cases he has had equally prompt relief.

Arsenical Neuritis.—Dr. W. Smith treated Fred. R., aged fifty-four, chairmaker, residing in a boat-house. Drinks very little; of fairly good habits; nationality, German. In good health. First seen at my clinic on December 20, 1897. States that about three months ago, mistaking rat poison, which the druggist said contained arsenic, for baking soda, he took a small teaspoonful. The immediate results were fainting, prostration, thirst, and severe vomiting, which lasted for three days. A few days after these severe symptoms had subsided he noticed a tingling and prickling in the finger tips and feet, which has been increasing.

Three months after he had taken the poison he complained of the following symptoms:

Heavy pains in lumbar region.

Frequent urination, sometimes scanty, at other times as much as a half-pint at each passage.

Occasional burning of urine.

Tingling and numbness in fingers and soles of feet.

Sensation as if boots were full of water.

Sensation at times as if something crawled from the knees to the toes.

Physical Examination.—Knee-jerk entirely absent. Muscles of arms and legs flabby. Emaciation, having lost thirty-seven pounds in ninety days (155 to 118 pounds). Feet and legs to the knees felt cold to the touch. Loss of sensation from the middle of the leg down. Below the knee the faradic irritability of the muscles was wanting, and present but slightly in the arms. Patient could stand and walk alone with his eyes shut. No dizziness. In walking he put his heels down first with considerable force. A subsequent examination of urine revealed an excess of bile pigments and urates.

At no time have the bowels given any trouble.

Strychnia in Progressive Muscular Atrophy.—Dr. A. K. Crawford, in reporting cases treated with this remedy quotes various authors to show the bad prognosis, and the statement of Gowers that strychnia hypodermically is the only means we possessed for

staying the advance of a case of progressive muscular atrophy.

The following is one of Crawford's cases: Mr. J. K., æt. forty-nine. Reported at the clinic March 9. Said he was strong until three years ago when wasting of the right hand commenced. The wasting has been progressive since that time, until now the right hand and arm are useless. It is a skeletonized extremity and hangs at his side limp as a flail. The left hand is now likewise invaded, and the man has to be dressed, attended, and fed almost like a baby. Of course he has his legs under him and can get about pretty well, but he is generally debilitated as well as helpless and discouraged. He had been the rounds of the various free dispensaries without any relief, and had been given plumbum in our clinic. The same response "no better" was given each time he returned the five weeks he was continued on this medicament.

On May 5 I got him started on the strychnia nitrate $\frac{1}{10}$ gr. hypodermically once a day. I likewise had the faradic and galvanic currents applied, from the cervical region down through the atrophied muscles twice a week.

When I first saw him the thenar and hypothenar eminences were gone, the metacarpal interspaces were shrunk, the arm muscles and deltoid were woefully atrophied, leaving the osseous structure of the limb and shoulder plainly visible. There was corresponding loss of function.

After about three months' treatment the man was able to dress himself, he could raise the arm fairly vigorously with the deltoid, he could flex the arm and raise the hand to the top of his head, he could grasp your hand feebly, and informed us that he could carry home a pitcher of beer with this lame member.

Potassium Iodide in Spastic Ataxic Paraplegia.—Halbert of Chicago⁶¹ records the case of a man, aged thirty-six, who came to his clinic with a diagnosis, given by a local doctor, of "neuralgia of the nerves." He suffered with pain and inability to properly use his limbs, his gait was decidedly spastic, and at the same time he had lost all power of co-ordination. Six months previously he began to notice that it was difficult to get up from a chair, and to descend

stairs was almost impossible. He had lost absolute control of the sphincters, and there was no ability to regulate the fecal or urinary discharge. He complained also of fulgurating pains and heaviness and numbness of the limbs. His history gave no clew as to the cause of his condition, his habits were exemplary, and there were no signs of a specific taint.

Careful examination showed that his right leg had lost entirely pain sensation and electrical reaction, deep reflexes were lessened but not lost, muscle-sense was imperfect, and there was no co-ordinate control. The left leg presented almost contrary symptoms; the pain and touch sensations were exaggerated, electrical reactions increased, reflexes all exaggerated, and muscle-sense intact. In walking this limb flopped about with a decided spastic jerk. Neither limb showed any signs of wasting; the sign of Romberg was pronounced, but there was no involvement of upper or cranial nerves. The debility was apparently developing rapidly toward a paresis of the lower cord, the pathology including descending degeneration of the pyramidal tract and ascending degeneration of parts of Goll's and Burdach's columns. Hence his condition was a combination of spastic paralysis and ataxia, and as it involved only the lumbar cord it resulted in this peculiar paraplegia. He was given potassium iodide 3x and the regular application of static electricity. It is now four months since he began this treatment, and he is not only walking without the aid of canes, but he has quite perfect control of his limbs. The sphincter debility has disappeared, he has gained flesh and strength, the sensations are more nearly normal, and he has returned to his work with every hope of eventual recovery.

In such a case the fibrinous exudate in the central cord structure was not sufficient to destroy the tract fibers, and hence the cure was possible. Had he, however, been given the lower potency of the remedy the author fully believes that the degeneration would have extended to the deeper cord structure. This experience he has verified in many similar cases.

Diabetes has been treated successfully with a diet of pure buckwheat flour.

INFLUENZA.*

By JOHN M. LACHLAN, M. D., Oxford, Eng.

Symptoms.

A few of the more important *symptoms* may be noted. The *fever* is usually moderate, though at times it may reach a high grade; there are frequently chilly sensations followed by flushes of heat, in many cases attended by profuse sweats ("sweating sickness"). In connection with the catarrhal form the *cough* is often one of the most distressing and obstinate symptoms; it is spasmodic in character, and in some of the older epidemics was confounded with whooping cough. It is apt to be worse toward evening and at night—as I know from bitter personal experience. It gives rise to pain and soreness in the muscles of respiration. In many epidemics the cough is not a prominent symptom, though it seems to be a marked feature of the present epidemic in Oxford. Another remarkable symptom is the *dyspnoea*. I do not refer to that dyspnoea which accompanies bronchitis, capillary or otherwise, but to that met with where there is no discoverable lung lesion. It is most probably due to some interference with the function of the vagus at its root, *i. e.*, of nervous origin.

There is, however, another possibility. We know that impulses are constantly passing up the vagus to stimulate the inspiratory center; these impulses are caused either by the state of the air in the air vesicles of the lung acting on the peripheral terminations of the vagus, or else by the composition of the blood in the capillary network surrounding these vesicles. Some eight or ten years ago I wrote a thesis suggesting that the comparatively large lymph-vascular spaces of the lungs were the incubating ground for the microbes which were supposed to be the cause of the specific infective fevers. In the beginning of 1892 a bacillus previously unknown to bacteriologists was discovered by Pfeiffer, and has been asserted to be the specific exciting cause of influenza. Solid particles in the air we know very easily gain access to the lymph-vascular channels through the "stomata" in the endothelial lining of the vesicles. It may be therefore that the bacilli (supposing all this to be true) during their incubation produce some

* *Monthly Homeopathic Review*.

material that has the power of benumbing the peripheral terminations of the vagus, and thus give rise to the dyspnœa, from the loss of the reflex stimulation to the inspiratory center. One might associate with this paresis of the vagus, the benumbing of other nerves, *e. g.*, those of taste and smell, and hence the temporary loss of these special senses.

Chest pains, stitches in the side (not pleuritic), frequent sneezing, loss of the sense of smell and of taste attend the development of the general catarrhal manifestations. In connection with the *nervous system* we note the early, rapid, and great prostration of muscular strength: in many epidemics this is one of the most remarkable features. The *headache* is often, no doubt, catarrhal in nature, but in many cases it has a far deeper origin, and is often accompanied with stiffness of the neck muscles, with cutaneous hyperæsthesia of head and neck.

Pains in the limbs are common—sore and bruised sensations, dragging and boring in the loins and calves, etc. Pains in the chest (pleurodynia are common, as well as pains in the throat and nape of neck. Great hebetude and torpor have marked some epidemics. That of 1712 was called the "sleepy sickness," by reason of the prevalence of these symptoms.

Diagnosis.

This is not as a rule difficult. The march of the epidemic, the number of persons attacked, the prominence of the nervous symptoms, the rapidly developed debility and the character of the cough, usually severe out of proportion to the physical signs, distinguish it from all other epidemic diseases. It has to be distinguished from the "simple cold" or non-specific catarrh. Some cases, too, bear a strong resemblance to beginning enteric fever, but influenza lacks the temperature curve, the usually rapid pulse, the splenic enlargement, and the eruption of enteric fever, and the progress of the disease will in a few days clear up the most doubtful cases.

Treatment.

At this point we necessarily and decidedly part company with our friends, the allopaths. My own firm conviction, from long and extended observation, is that the allopathic methods of treatment are far more dangerous to

life than the disease itself. Nor is the reason far to seek. The allopathic policy is one of suppression and concentrated attack upon single symptoms—symptom treatment, in fact, in its most violent and fatal form. Is the fever high? Then it must be brought down *at any cost*, shutting his eyes to the fact that it is a mere symptom, and that to forcibly bring it down is equivalent to screwing down the safety-valve of a steam engine, while the fire, or source of the fever, is left untouched, with the result that something else gives way—some more vital organ is attacked. The same policy is pursued with other outstanding, isolated, single symptoms. Is the catarrh troublesome? Then it must be treated specially and dried up, with the result that the disease centers upon some more vital part of the respiratory system; and so on through the long and wearisome list of single symptoms. Yet from their tower of scientific straw, plastered and painted to look like granite, they sneer at us because, *so they say*, we treat symptoms, and in thus judging us they condemn themselves, for they who judge practice the same things, only more so. One is forcibly reminded here of a parable concerning a beam and a mote. But *we do not treat symptoms*; we merely make use of them as a traveler makes use of milestones and finger-posts, hills, trees, or other topographical peculiarities of the country through which he passes, in order that he may know his exact whereabouts, and as guides to lead him to his desired destination. The difference between these two modes of using symptoms is as great as it is possible to be.

In absence of homeopathic treatment during an attack of influenza the best thing for the patient to do is to go to bed, between blankets if the muscular pains are severe, take light liquid nourishment, *e. g.*, hot milk diluted one-half with barley water; if the cough is severe, dry and spasmodic, then set a bronchitis kettle going in his room to keep the air moderately moist. For the rest avoid all allopathic drugs, and take no thought for the temperature or anything else. I suppose this is all too simple and easy for our allopathic brethren to be content with; they must *do* something more than that.

"Folk maun do *somethin*, for their bread,
An' sae maun death."

The above may be regarded as the *general treatment of influenza*, and which may be practiced alike by homeopath and allopath.

We now come to the *specific medicinal treatment*. Do not misunderstand me; there is no *one specific* for influenza, or any other disease, nor in the nature of things can there ever be. What we have to do is to find and apply the specific remedy for each individual case as it presents itself, though, as in all epidemic diseases, there will most probably be one or two medicines more frequently indicated than others. I will now name a few of the medicines which I have found more or less useful in the various epidemics since 1890, giving the indications which seem to me (rightly or wrongly) to warrant their use in this special disease.

Aconite.

In discussing the claims of this medicine to a place in the therapeutics of influenza, I would first direct attention to Hahnemann's introduction in his *Materia Medica Pura*. There is one group of symptoms so characteristic of aconite that Hahnemann said: "Aconite should not be given in any case which does not present a similar group of symptoms. These are the symptoms of the *mind and disposition*, viz.: "Restlessness, anxiety, and uneasiness of *mind and body*, causing tossing and sighing and frequent change of posture; forebodings, anticipations of evil, anguish of mind, dread of death, and even distinct anticipations of its occurrence."

Now aconite does not seem to have any effect on organic substance—does not produce any marked or characteristic change in the tissues or fluids of the body, and it cannot therefore in itself be sufficient to carry a patient safely through a complete course of pure acute inflammation of any organ or system. The only modification to the above statement is in the case of measles, where, so far as my experience goes, aconite is usually in itself quite competent to do all that is needed to be done, and I rarely give measles cases any other medicine.

In the action of aconite that localization is wanting which is the essential feature of these inflammations. Its *great* use in such cases is in the very early stage of the inflammation, *i. e.*, in the stage of *general arterial excitement*, which pre-

cedes its localization in any one organ or tissue, and therefore even *before* the "active hyperæmia" stage and long before the stage of exudation. It must never be given merely to "subdue the fever," and then some other remedy added "to meet the case"; nor is it to be alternated with other drug for the purpose of "controlling fever." If the fever be such as to require aconite, then no other drug is needed, and if other drugs seem indicated one should be sought which meets the fever as well, for each drug has a fever after his kind.

There is no resemblance in the pathogenetic symptoms of aconite to the features of any dyscrasia, and for this reason it can never be required in any of the miasmatic fevers or dyscratic diseases—save perhaps as a rare and temporary intercurrent in some complication, or where the group of symptoms of the mind and disposition is present. Its action bears no resemblance to that of any poison, such as that which produces typhus or typhoid, intermittent or remittent or continued fevers. Our allopathic friends even have discovered that aconite is "good for fever," and they have tried it in such fevers as typhoid with, I need hardly say, no beneficial result on the death rate of that disease. Some of our own men, with a total misunderstanding of the essential inner nature of the pathogenesis of aconite, and led away by a few unimportant and superficial similarities, have even recommended its use in "ulcerative endocarditis"!

What then is its use in an epidemic of influenza? It can hardly be of use in *genuine* influenza; but it is of great use in those cases where one is in doubt whether [the symptoms manifested are the result of a *simple chill* or of the specific poison of influenza. A few doses of acon. 30 will speedily banish all doubt; for if the case is the result of a simple chill and be taken sufficiently early acon. will be all-sufficient to effect a cure, but if due to the poison of influenza it will have no beneficial effect and some other remedy will have to be given.

Gelsemium.

In the earlier epidemics of the present series—from about 1889 to 1892—gelsem. and the somewhat similar remedy, baptisia tinct. were very frequently required, and occasionally

eupator. perf. The difference between gelsem. and baptis. is chiefly one of degree, the former being the milder acting of the two, baptis. being the more deeply acting, and being, as it were, an advanced gelsem. Both have intense muscular soreness and prostration, both have drowsiness and nervous excitement with prostration, and both have an afternoon exacerbation of fever. In gelsem. we have the suffused redness of the face, causing a semi-intoxicated look, with general mental torpor and thick, slow speech, not so much due to the mental torpor (as in baptis.), but rather to the depressing effects on the motor nerves. I have always regarded the intense occipital headache beginning in the nape of the neck and cervical spine and spreading over the head as a special indication for gelsem. as opposed to baptis.; this headache is often accompanied by stiff neck. The patient answers questions either slowly or imperfectly, as if all the functions of the brain were blunted—like a person well under the influence of liquor.

It is possible that gelsem. would have been the remedy also in some of the epidemics of the past, when many of the cases were supposed to resemble "spotted fever," *e.g.*, in the epidemics of 1729-30, where we find such symptoms as great pains in the limbs, with fever, drowsiness, petechial eruptions between the fourth and seventh days, copious sweats, bilious stools, etc.

The gelsem. fever seems to be remittent or intermittent in its type. I believe also when we meet with cases of influenza in children, other things being equal, gelsem. is a remedy likely to be very useful, as it is generally in the remitting types of fever in children. The child is drowsy, with suffused redness of the face; is peevish and irritable when aroused, but this is quite different to the mental restlessness of aconite.

Baptisia Tinctoria.

Much that I have written about gelsem. applies with equal, and even greater, force to baptisia—the fever, the drowsiness, the torpid semicomatose conditions of the brain, the uniformly suffused red, besotted face, the intoxicated look, the intense muscular soreness and prostration, the restlessness, *because the parts rested on feel sore and bruised, and the bed also feels as if it were too hard*, and hence the

patient moves often in his attempts to find a soft place (in this latter respect it resembles arnica). It is useful in those cases also which seem at their outset to have a close resemblance to "typhoid fever," or perhaps I ought to say the "typhoid condition," as well as those cases in which the peculiar form of dyspnœa above mentioned occurs.

Eupatorium Perfoliatum "Thoroughwort" or "Boneset."

This medicine is useful in cases where the *bone pains* are specially prominent—intense aching in the limbs and elsewhere as though every bone in the body were being broken. In such cases we have constant change of position by the patient *even though the pains are not worse by repose*; he complains of a bruised, broken feeling all over the body. Both this remedy and baptis. have marked soreness of the eyeballs. I have not had occasion to use eupator. perf. a great deal, though one did meet with appropriate cases occasionally in the earlier epidemics of this series, and the present type of influenza seems also to tend in that direction.

Natrum Muriaticum.

This very useful medicine is to be kept in mind for those cases where the loss of taste and smell accompany the catarrh (compare puls.), together with hydroa or "cold sores" on the lips and cracks at the angles of the mouth. It will be still further indicated if the patient has been dosed with quinine, ammoniated or otherwise.

Arsenicum.

This is a remedy of great value in the aged and in children, and especially in the catarrhal form of the disease when we meet with the characteristic prostration and weakness, with its sudden onset and rapid advance, with burning heat and unquenchable thirst and restlessness. Further it is of great use in those cases where the gastro intestinal irritation is a marked feature, giving rise to diarrhea, and more especially if the diarrhea should be brownish or coffee-colored and provoked by every attempt to eat or drink. We are taught in a general way that arsen. should not be given too soon in a disease lest we increase the downward tendency (*e.g.*, in typhoid fever), and that rhus tox. may with advantage precede it. But, as in most cases,

there is an exception to the rule, and that is in gastro-enteric inflammations, as in the cases now under consideration arsen. is often called for at the very beginning of the case, and nothing but benefit follows its administration when properly indicated. The restlessness is one of the characteristic indications for arsen.; the patient cannot rest in any place, changes his position continually, and that too even though he is fatigued by so doing. The period of general aggravation is from 1 to 3 o'clock A. M.

There is at first sight a considerable likeness between acon. and arsen., viz.: the restlessness, full bounding pulse, great thirst, hot dry skin, anxiety and fear of death; but acon., as we have seen, has practically no effect on the tissues or fluids of the body, whereas arsen. *affects both profoundly.*

Arsenicum Iodatum.

This is a remedy I have not used much, chiefly because the provings are so meager. It is said, however, to be specially useful, and should therefore be kept in mind. In a general way the indications for its use (chiefly *clinical*, I believe) are the same as those of the oxide, but it is to be preferred when the symptoms indicating arsen. occur in marked strumous constitutions. It is stated to be specially useful for influenza in horses, as in 1880, when there was an epidemic of influenza affecting horses chiefly, in Canada, and the United States, east of the Mississippi River.

Rhus Tox.

Should not be forgotten, as it may occasionally be useful. It has the well-known restlessness which compels the patient to toss about; is worse on first moving, but better from continued motion; it compels him to toss about in bed, and he is *better for a short time* in each new position, but very soon he has to change again. This tossing is not, like arnica and baptisia, because the bed feels hard, but because of the tearing pains in the muscles and fasciæ. There may be copious coryza with sneezing and dry cough, the cough being worse from evening until midnight, and excited by cold drinks.

Arnica Mont.

Is occasionally useful. Like the others, it has a restlessness. In this case the patient may be

kept awake till 3 o'clock A. M. by heat, restlessness, and constant desire to change position, the bed feels too hard, and so he moves often in order to find a soft spot. The patient at the same time may be drowsy and stupid and *very apathetic.*

Allium Cepa (the Common Red Onion).

In cases where we have profuse watery discharge from the eyes and nose, but without the great and rapid prostration characteristic of arsen. The tears are bland, but the nasal discharge is very acrid and watery, and accompanying these symptoms we may have a very painful laryngeal cough. It is interesting to note that the onion contains appreciable quantities of phosphorus and sulphur.

The Cough.

Should any special remedies be required for the cough—apart from those indicated by the general symptoms—sticta pul., phos., hyos., con., dros., rumex, and ant. tart. are a few of the more likely ones.

Sticta ("Lungwort")

Has been used largely in influenza, where the cough was a prominent and distressing symptom. It is dry, worse in the evening and night, and allows the patient neither to sleep nor lie down.

Phosphorus.

With the cough we find rawness and soreness of the chest, with oppression at its upper part more especially, as if a weight were lying upon it. The cough is aggravated by cold air and by lying on the back or left side, and from talking and laughing.

Hyoscyamus.

An irritable, dry, nervous cough, which comes on as soon as the patient lies down, but is better on rising or sitting up (puls. is similar in this respect).

Conium.

Tormenting night cough when first lying down; there is hardly any cough during the daytime. It is spasmodic in character and simulates whooping cough. The patient is unable to expectorate, but must swallow what he coughs up.

Drosera.

A spasmodic, hoarse, and deep-sounding cough as soon as the head touches the pillow; worse

in the afternoon and evening, and again *after midnight*.

Rumex Crispus.

Violent, incessant, fatiguing cough, aggravated or excited by pressure on the trachea or throat-pit, by talking, and by every inspiration of cool air, or by any variation in the volume, rapidity, or temperature of the inspired air. It is provoked by a tickling in the suprasternal fossa, and is accompanied by stitches through the left lung and rawness under the clavicles. It is worse in the evening and night, and from 2 to 5 A. M.

Antimon. Tart.

In bronchitis, with much loose phlegm but feeble expulsive power, *i. e.*, in the threatening "paralysis of the lungs," especially in infants and the aged. The mucus is plentiful, loose and rattling, yet the patient cannot get it up, and may not even feel the need of coughing, because the sensitiveness of the reflex mechanism is being blunted by the venous condition of the blood. Probably along with this we may notice a bluish tint on the red surface of the lips and the gradual development of a drowsy condition. When these symptoms are present the patient is in a *very dangerous* condition. Bary. carb. is complementary to ant. tart. in cases of impending lung paralysis in the aged.

Another medicine well worth keeping in mind is kali iod., as it is of great use in *oedema pulmonum*, accompanied with great rattling of mucus in the chest, with watery expectoration *looking like soap-suds*. In the case of children, ipecac. often precedes the ant. tart. stage.

Let me point out (1) the value of steam in the atmosphere of the room in cases of dry irritating cough; (2) in the case of the aged it is most important to avoid as far as possible any risk of "hypostatic congestion" of the lungs. If the patient is able to bear it, he should be propped up with pillows, almost in a sitting posture, so many hours each day, and failing that he should be turned frequently from one side to the other, thus calling in the aid, rather than permitting the hindrance, of gravitation to the circulation through the lungs. In regard to medicines, ant. tart. and kali iod. will likely prove most useful, together with the judicious use of stimulants, *e. g.*, whisky and water.

In regard to *complications* and *sequelæ* I have

had little or no experience. At the time of writing I have two old ladies, one seventy-nine, the other eighty-three, suffering from bronchitis, which is *possibly* the result of a recent attack of influenza; but with this exception I have had no experience in *complications*, nor have I ever had a single death from this disease, nor any patient even within measurable distance—speaking humanly—of death, with the exception of the first old lady above mentioned. Nor do I think that this experience is peculiar to me; I believe it is the general experience of homeopathic practitioners of all the various grades of faith and practice.

In this respect homeopathic treatment contrasts very markedly with old school therapeutics; for after all, though the old school may not be quite so repulsive *looking* as in the days when she was armed with, and made such free use of, the lancet, nevertheless it is to be doubted whether with her antipyretics, antiperiodics, purgatives, narcotics, hypnotics, stimulants *et hoc genus omne*, being at the same time so ably aided and abetted in this direction by the manufacturing chemist, it is to be doubted, I say, whether she is less dangerous.

I have intentionally said very little about *potency*. Most of the remedies named in the foregoing list work very well in the medium and lower potencies (1x to 12) in influenza cases, though one may often go higher with advantage to the patient. As I have frequently said, so I would say again, that I believe the potency question would look after itself provided we would always select the *most like* remedy, and give it alone, only changing to another if we find the medicine is *not* the most like, or if a change of symptoms demand it. By constant and daily practice at this one would speedily form scientific *habits* of thought and practice, so far as prescribing is concerned. Another point which cannot be too strongly insisted upon is that, having given a medicine, whatever the potency, should the patient show distinct signs of improvement, then it should be discontinued, or at least given very much less often, and then as soon as the improvement ceases it may be again given, or, if the symptoms have altered, another more appropriate one should be selected. In this way one can gauge exactly how much medi-

cine is necessary to cure the patient, and thus avoid the risk (a very *real* one) of introducing complications from over-dosage—I mean that when given in excess of what is necessary to cure, the medicine may begin to produce its own characteristic *pathogenetic* symptoms.

In the old school the practice is to give *as large a dose as the patient can stand*, and repeat it as often as possible with the same proviso, *i. e.*, the dose should *just be under the minimum lethal*. In homeopathy the rule is to give the *smallest amount that will cure the patient*; anything more is clearly unnecessary and wasteful, and *may be* injurious.

As a "pick-me-up" after an attack of influenza a few doses of psor. will be found of great benefit.

SHOW-OPERATIONS AND CLINICS.

THERE is not a young physician who has been a year in active practice that does not find himself ill-equipped as regards the simplest matters in minor surgery and the treatment of slight ailments. For several years he has witnessed amputations at the hip, cœliotomies, big brain-operations, and other rare major operations, but when it comes to chilblains, a bit of steel in the cornea, a leg-ulcer, soft corns, or giving an anæsthetic, etc., etc., he is often utterly without experience and definite knowledge. The great professors have shown themselves off and proved their ability to cope with the extreme, the rare, and the grave issues of life and death, but have failed to tell how impacted wax is best removed from the ear, or how a bruised or dislocated finger is to be treated. The great clinician has discoursed eloquently about typhoid fever, locomotor ataxia, and smallpox, but when his pupil is called upon to prescribe for a case of common cold, fainting, or simple diarrhea, he too often must run to his books, and frequently they do not help him much.—*The Philadelphia Medical Journal*, copied in *American Medical Monthly*.

That's very good! And it is unfortunately too true. There is altogether too much theory in our teaching; too much burdening the mind of the student with our surpassing greatness and skill. We no longer diagnose a green-apple or a cucumber belly-ache, or worms, or diarrhea. It instantly becomes some grave, long-handled, with-anti-toxine-curable disorder, if it be not a prompt case for the gynecological knife. Let us have a Renaissance of Medical Teaching.

OUR BILL NYE.

PROVIDENCE, R. I., March 1, 1898.

DEAR DOCTOR: Permit me to trespass again upon your attention with my annual interrogatories. The subjects are familiar, sometimes termed simple, oftentimes proved bothersome. Revolving years should impress the fact that attention to trifles is the best preclusion of calamity. Hoping to meet you in June at Omaha, unless my services as an artillerist should sooner be called into requisition by Uncle Sam, I have the honor to be.

Faternally yours,

GEORGE B. PECK,

Late Lieutenant Second Regiment R. I. Volunteers.

More recently Major Providence Marine Corps of Artillery (the first battery of light artillery organized in the United States outside the regular army, and the mother of all the Rhode Island batteries during the War of the Rebellion).

What remedies do you find most often indicated for Whooping Cough? Kindly state them in the order of frequency of demand.

Now isn't that clever in George? Our last authentic report concerning him was that he had donned the ministerial cloth and would thenceforward be lost to the obstetrical section of the Institute. But that calumny has happily been refuted. Now he appears once more, this time in his regimentals, burning with martial fire, and ready to take his part of the \$50,000,000.

TALLY ONE FOR NEBRASKA!

THE following resolutions were passed at the February meeting by the Nebraska State Board of Health (Dr. B. F. Bailey, President) which puts Nebraska at the head of the line for real progress in matters medical:

1. RESOLVED, That the Nebraska State Board of Health will hereafter recognize the diploma of no foreign college as a basis upon which to issue a State certificate unless the graduate has successfully passed a government examination and received a certificate entitling him to practice medicine and surgery in the country in which the diploma was issued, or unless he is a licentiate of a recognized college of physicians and surgeons authorized to grant licenses.

2. No certificates will be issued by this board without letters of recommendation with regard to the moral and professional character of the applicant from at least two reputable medical men who live in Nebraska, or if from non-

residents of the State, such letters must be endorsed by reputable medical men of Nebraska.

The clear and patent intent of these resolutions being to prevent those holding diplomas from good institutions, but who desire to "quack it," from getting into the field. Nebraska demands from strangers not only credentials of qualification, but also of character, thus protecting Nebraska from the foreigner who tries to "work" the people.

Why is not this a wonderful step in advance of those barb-wire restrictions of some of our States, which keep out competent medical practitioners because they can no longer give the multiplication table backward—but which let in every form of quack who is able to pass that rhadamantine but theoretic tribunal and possesses a diploma thereafter to engage in the flagrant healing of gonorrheas and syphilitics in from three days to ten days, according to the length of the victim's purse, and the degree of infamous advertising the said letter-perfect graduate may have money enough to pay for?

ACCIDENT INSURANCE.

THE reading recently of the claim of an alleged accident insurance company that it was not liable because the assured—a physician—got on a freight train in order the more quickly to reach a distant patient, and being injured in the wrecking of that freight train, gives rise to the query: Is there an Accident Insurance Company which insures against *accidents*, however encountered—so long as they are clearly accidents? In the case referred to above, the company claimed that the freight train was not a passenger train, was not scheduled as a carrier of persons, and, therefore, the physician took his case out of the jurisdiction of the company! Is it become needful, if a physician carry an alleged accident insurance policy, that he correspond with or telegraph or telephone to the railway company, or ship company, or any other common carrier a few days ahead and ascertain whether the proposed train or vessel or mode of conveyance is a legal affair which, if it comes to grief, will not destroy the validity of his accident policy? Would it not be the more rational assumption, on the part of the

alleged Accident Insurance Company, that no one in his right mind will rush into an accident; and if he be not of sane mind the Company should not have taken his risk? The reading of some of the accident policies which the traveler purchases at the railway ticket-office window a moment or two before he steps aboard the train, seems to him, on a calm reading, to insure everything except an accident. We repeat: Is there an Accident Insurance Company which insures against *accidents* however produced?

THE EMASCULATED TRANSACTIONS.

BY what authority has the Intercollegiate Committee's report been emasculated, in that not one word of its Sub-committee's report on Dunham College's casting-out appears in the 1897 "Transactions"? Isn't this carrying the revision of papers and remarks a little too far? If the "Transactions" are not to be a record of the transactions had in the Institute, but the rather a patched-up, licked-into-shape, stair-case-wit, goody-goody report of the Institute's alleged doings, then it might as well be done away with wholly. Any expense at all is too great. The names of the members, senior and junior, can be published very much more cheaply than as now done. The Dunham incident was a prominent, flagrant transgression on the part of someone connected with the Intercollegiate Committee: its decision was put in writing, and handed to the College as a reason for its non-admission. That report was signed in due form, and bore every evidence of authenticity; so much so that Dunham College took it as a decree of the Institute. What right, therefore, had the Intercollegiate Committee to strike out all evidence of this transaction from its report? Was it afraid to meet the Institute?

COMBINATION-TABLET JOURNALISM.

UNDER the lash of the more dignified journals of the school, we have latterly taken to reading Barnes' "Analogy" and Bunyan's "Pilgrim's Progress," in order to acquire a more logical and reverential style of composition. But even thus accoutered we fail to find grace with several of the journals: and we now and

here give warning if these several dignified journals don't stop twitting us, and presently take up the cue to compliment our efforts to be peaceful and mild and inane, that we shall go back to our flippant and sarcastic fleshpots and rake the evildoers in the profession as had been our wont and custom until the *New England Medical Gazette* on the one seaboard and the *Pacific Coast Journal of Homeopathy* on the other pointed out to us how to be dignified, moral, religious, and—prosy. Ah yes, ridicule is a dangerous weapon in the hands of him who uses it carelessly: but for him who points a moral or adorns a tale there is no more pungent and satisfactory way of reaching the evildoer. A sermon will glide off the back of the average man as smoothly and harmlessly as water off a teal duck; but touch him in the joints of his armor with but the pin-prick of ridicule, and he is vulnerable. Don't wonder, therefore, that Platt and Croker tried to muzzle the cartoon-publishers *Puck* and *Judge*; nor that the publishers of Combination-Tablet homeopathic journals grind their several and respective molars, and wish to Heaven that that AMERICAN HOMEOPATHIST editor would let 'em alone, and take to writing vainglorious, moral, religious, wyemsea, w. c. t. u. editorials, like our editor does! That lifts up the profession! That makes us all feel good! That should be the aim of everybody! Let our enemies of the old school amuse themselves by pointing out our errors! Then we can sleep on! And our homeopathic * pharmacy would prosper apace!

THE AMERICAN INSTITUTE DISRUPTION.

ALL this talk indulged in by some of the homeopathic journals of a split and a secession in the American Institute of Homeopathy at Omaha is the rankest nonsense. The critics and editors who are criticising the Institute methods, as President Wright says, are the Institute's best friends. A truckling acceptance of everything done and said at any meeting of any body of deliberative men is the veriest unkindness to that body. If all men were built over the same last that might be a possibility: but so long as there is an infinite variety in

human kind there will be as infinite a variety of opinions. And if one may not express his opinion, lest he be anathematized, what use to belong to that organization? The Institute, notwithstanding its excellent standing and its excellent record, is not infallible. It may have made mistakes. Probably has. It is the inherent right of every representative of a representative body to have liberty of opinion touching the conduct of that body corporate or incorporate. But because the critics do indulge themselves, is no warrant for the statement that there is disruption in the air: that there will be a new society formed. The American Institute is large enough and old enough and even-tempered enough to right its own wrongs.

And in the same breath permit us also to expostulate with that spirit, emanating from the self-constituted defenders of the Institute and some of its Committees, which accuses the critic with being inflammable, sensational, flippant, and the like. The man on the outside of the charmed circle may and often does have more knowledge of the effect of the wrong done in that circle than he who participates in the wrong consciously or unconsciously. The lotus eater does not feel his surroundings. There will be no split in the Institute. The criticism is honest though sometimes drastic. We are all good Americans in time of need—*vide* the unanimous appropriation of that \$50,000,000; party lines disappear. We are all good homeopaths when an outside foe walks on our toes; but in time of peace we employ our leisure in perfecting our bulwarks, in throwing out the antiquated, and introducing the new.

AMERICAN INSTITUTE OF HOMEOPATHY.

BUFFALO, February 10, 1898.

The Executive Committee in whose care the Institute has placed its affairs for the year 1898 sends this hearty greeting.

With one exception, this is the first time the Institute has ventured farther west than the great Mississippi. The recent rapid growth of homeopathy in the West, and the interest in the western societies, promise much for the Omaha attendance. Indeed the whole present membership, and a large prospective one west of the

* Limited.

median line are already so thoroughly aroused and interested for the coming meeting that their attendance in large numbers is fully assured. If any extra attraction were needed to induce our eastern men to make the slightly extended railroad trip, they can find it in the circular of the Trans-Mississippi Exposition, with its beautiful illustrations showing a second edition of the "White City." The buildings for the various industrial purposes, for the United States Government, and for eight different States, are planned on an elaborate scale of architecture.

Dr. Wood, as chairman, and his large local committee of all the homeopathic physicians of Nebraska and western Iowa have shown great activity and enterprise in already perfecting arrangements that we hope will induce you to place yourself and your family under their hospitable care for at least one week. They have secured for headquarters "The Millard" Hotel, and assure us of abundant hotel room at prices to suit everyone. They have planned for attractive excursions to the Rocky Mountains, Yellowstone Park, etc., etc. Indeed, it would appear that this excellent committee, with the push of the West, is going beyond all precedent. Moreover, the transportation committee will quite likely secure one-half fare on all railroads leading to Omaha.

The general interest manifested by our medical journals along the whole line, so early in the year, is decidedly encouraging. The discussion and criticism on Institute work will inevitably produce good results. The faithful critic is one's best friend.

You, doctor, should attend the Omaha meeting in June; first, because the American Institute of Homeopathy, standing as it does for the best in scientific and practical medicine, is eminently worthy of being sustained by every one of its members; second, because it needs your support in maintaining a high standing in the medical profession. You can contribute to such a desirable result by assisting in its deliberations and discussions. Hence we earnestly urge you to come prepared to discuss at least one of the subjects named in the programme which you will receive before the time of meeting. Scientific research is constantly making discoveries, some of which we find on investiga-

tion, affect the practice of both the physician and surgeon. In the corridor and in the sessions of the Institute you can have face-to-face discussions on the adaptability of these adjuvants to your practices. But more than all, we want the grasp of fellowship in the common cause of humanity and a noble profession.

Fraternally yours,

A. R. WRIGHT, M. D., *President*.

E. H. PORTER, M. D., *Secretary*.

AN INNOVATION.

THE *Big Pix-Cresol* of Kansas City makes an innovation in the publication of its editorial staff by giving under its title and editor's name a list of eminent physicians, as follows:

Names of Contributors: Dr. Wm. Tod Helmuth, New York City; Dr. E. H. Pratt, Chicago, Ill.; Dr. S. B. Parsons, St. Louis, Mo.; Dr. W. E. Green, Little Rock, Ark.; Dr. J. M. Lee, Rochester, N. Y.; Dr. Chas. E. Walton, Cincinnati, O.; Dr. I. T. Talbot, Boston, Mass.; Dr. B. W. James, Philadelphia, Pa.; Dr. H. F. Biggar, Cleveland, O.; Dr. C. F. Menninger, Topeka, Kas.; Dr. Wm. Davis Foster, Kansas City, Mo.; Dr. A. E. Neumeister, Kansas City, Mo.; Dr. O. S. Runnels, Indianapolis, Ind.; Dr. M. T. Runnels, Kansas City, Mo., and others.

Very clever scheme that. But we would like to say that, while we are not employing a colored porter more than once a week now to "tote" our earnings to the bank, we are willing to lay a wager we can mention five or six of these physicians who do not know their names are published in this prominent way, and that they have *never* contributed an article to the *The Big Pix-Cresol*. A very enterprising journal this, but it is not wise to be given over so much to pix-cresolism.

HONORARY TITLES.

AND now we have the spectacle of American homeopathic graduates appending to their names the symbol "H. M.," doubtlessly intended to imply Master of Homeopathics. Rats! The only title to which every practicing homeopath should aspire is that of M. D.; when he has earned that in due course, and has practiced under it for a half-dozen years, his patients will know whether he is a Master in Medicine, or a mere medical bungler who needs to hoist him-

self out of mediocrity by the pigtail on the end of his wig, *à la* Munchausen. Drop all this aping after royalty—which requires an extra wide coat front in order to give place to all the orders conferred on them by the other non-working royal parties. This slobbering of titles was most offensively in evidence at the (London) International Homeopathic Congress eighteen months ago, by some members of the American contingent—some who were, and some who were not present. America has the reputation of being free of titles and decorations—except in Kentucky. Every man is supposed to be what he is, by virtue of the divine right of hard work, and not because of the gingerbread titles conferred upon him by some two-by-four university down in the county-seat years after he barely passed through the graduation exercises, and for no special reason except since that aforesaid passing he has not been incarcerated in any penal institution, and has on the whole paid his bills, his rent, and his taxes. Act well your part, there all the honor lies. The supernumerary letters at the end of a man's name in the great majority of American cases are lies, downright lies! The owners and occupants thereof are traveling and receiving aid and comfort under false pretenses.

Go to and through a first-class homeopathic college, earn your spurs, then go into the country for five or ten years, and you will not need any A. M.'s or H. M.'s at the end of your name. The diploma and examinations are legal requisites. When, however, you have complied with the law of your State, hide the diploma in its tin box, and as quickly as possible forget that civil service examination. Then turn to and practice medicine twenty-four hours every day, (Sunday not excluded), and you will find that you will succeed in making both a reputation and some money.

Globules.

Dr. P. L. Hatch has located at Condesport, Pa., and reports good success, considering that there has never been a homeopath there before.

Professor W. A. Dewey informs us that he is not writing any book. He has been occupying his few leisure moments in reviewing his

books already published, with a view to a possible future edition.

Now since the *Materia Medica* Conference is to have its third session this year at Omaha, why not assume that it is "three times and out": in other words, that the Conference has now completed its work, and so make a final report asking to be discharged—and for good!

Lippincott's Monthly still continues its interesting literary exhibit. It had a story by Captain King, which was of the usual interesting kind, never flagging for an instant. It has all its usual grist of good things which are so delightfully refreshing and entertaining to the busy doctor.

Says the *Hahnemannian Monthly*: You had better watch out or the *New England Medical Gazette* will list you with the undignified and flippant homeopathic editors, if you—Van Baun, Bigler, *et al.*—persist in writing any more such bright and newsy editorials as have recently had a habit of appearing in your pages. The safe position is mediocrity. Therefore!

Another copy of the *Medical Advance* has appeared upon our table with date beginning this year. The editor says that he was restrained by the former publishers from publishing the journal under its original name, but that the court had now dissolved that injunction. Hence the delay. The *Medical Advance* comes without an advertising page. This will please several growlers who want nothing but reading matter.

We have not yet received our copy of *The Limitations of Rational Medicine*, with its artistic footnote referring to "my little book recently published by A. Bankrupt Firm & Co., in Chicago," etc. Almost all the other journals have received and printed the Original Article, and, with but one blessed exception, viz., *The Medical Century*, published the innocent looking thing, footnote and all. But perhaps our copy was missent and will appear later.

The Hahnemann Monument Committee have devised a new feature for increasing the fund, namely the solicitation of a birthday donation of five dollars from each homeopath on Hahnemann's birthday anniversary. This is a good idea and should be promptly responded to. The monument will not take bread out of your mouths, brethren, as does and will continue to do worse and worse each year the hospitals and dispensaries and sanitariums which you have been in the main instrumental in building up. Stop cutting your own throats for a brief space of time, and divert the money you would have collected for that millionaire hospital to the fund of the Hahnemann Monument.

Put a hot water bag over the heart in threatened heart failure.

Cocaine is not soluble in vaseline or lard, but is readily so in olive or castor oil.

The *Literary Digest*, a weekly compendium of the contemporaneous thought of the world, is a very welcome addition to our Review Table.

The Twenty-ninth Annual Meeting of the Homeopathic Medical Society of Michigan will be held at Grand Rapids Tuesday and Wednesday, May 17 and 18. The general circular issued by Dr. R. Milton Richards shadows forth an excellent programme. Every bureau has workers in it.

From the *Pac. Med. Jour.* we note that Auvray has conducted on animals a study of the possibilities of resection of the liver in the human being, that leads him to conclude that the procedure is applicable, in the living, to the ablation of tumors and cysts situated in the parenchyma of the liver.

News comes from Chicago that Dr. Sheldon Leavitt has resigned from Hahnemann Medical College to take place in the Chicago Homeopathic, and that Dr. Charles E. Fisher, editor of *Medical Century*, etc., etc., has been elected to Dr. Leavitt's former place in Hahnemann. Congratulations for everybody.

The various State homeopathic societies are making their annual preparations, and soon the professional table will finish the annual programme of the special society to which he may belong. The Ohio Society is working hard to make its Columbus meeting a banner occasion. President Geohegan and Chairman Reddish (materia medica) are a unit on this point.

A very beautiful word-picture on "Ridicule" appears in the current issue of the *Pacific Coast Journal of Homeopathy* as an editorial leader. Since it makes no reference, even remotely, to homeopathy on the Pacific Coast, or raising the professional standard among California lodge physicians, or the advocacy of combination tablets (homeopathic), we wonder why it was published.

In our almost ungovernable grief at having offended the dignity and peaceful serenity of some of our homeopathic contemporaries, we find a little flutter of pleasure on noting that one of these pharmaceutically-owned homeopathic journals has withdrawn its noisome Combination-Tablet advertisement from its said homeopathic journal. It is so good of these business folks to give way to gentle remonstrance—such as the AMERICAN HOMEOPATHIST has been indulging in latterly.

There was witnessed the other day the amazing spectacle of a local agent of the *Alkaloid Clinic* handing free copies of that journal to every student in a homeopathic college as they issued from the class room! Isn't that rubbing it in? Sir?

Therapeutic Gleanings.—In the treatment of acute cystitis five drops of the tincture of thuja every three hours is a valuable remedy.

One grain of the bichromate of potassium dissolved in four ounces of water, a teaspoonful every two or three hours, will be found to give relief in loss of voice, hoarseness, and in bronchial coughs.

One drop of croton oil dissolved in thirty drops of chloroform and one ounce of glycerin, given at night, on an empty stomach, followed in the morning by sufficient castor oil to purge well, will remove tapeworm.

In uterine disorders with hysterical symptoms and mental depression at the menstrual period, a small dose of *cimicifuga racemosa* every two hours, for a few days preceding the epoch will produce admirable results.—*Medical Summary*.

The *Clinical Reporter* of St. Louis has taken another flop, but, we believe, a flop in the right direction. After having been absorbed by its former rival, the *St. Louis Journal of Homeopathy*, the latter adopted the name of the *Clinical Reporter*, and continued with the former double-headed editorship. Then one editor dropped out. But for some inexplicable reason the new journal does not seem to have done well. Of late it was simply an echo of the St. Louis Homeopathic Society, with a little of the local college interspersed. Its clippings were in the main from old school journals; and its editorials lacked originality and fire. It would seem as if the day had passed when the subscriber will continue to subscribe for a journal that has neither opinion nor news. The journal has had some queer ups and downs. It is an old venture, and once in its many mutations our august name was printed on its cover page as editor. We are glad, therefore, to learn from a recently received notice that Dr. I. D. Foulon, one of its most successful editors of the recent past, once more goes to the front as its editor and that the canal boat era has closed. We look for big results. He gave the original *Reporter* a standing in the general homeopathic profession, which his several successors either could not or did not follow. And so it became a mere local society and local college print.

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NEW YORK, APRIL 15, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



E. RICHARDS, M. D.,
White City, Kan.

TWO MOST EXCELLENT APPOINTMENTS.

FROM late advices we learn that Dr. Eugene H. Porter of New York and Dr. Willis A. Dewey of Ann Arbor have been elected Corresponding Members of the British Homeopathic Society. This comes to us with the grateful conviction that the B. H. S. has at last done a very popular and professionally proper thing. As we said at the time, and have several times referred to the same occasion since, the former "batch" of American appointments—several of them, at

any rate—were conferred without sufficient good cause, and seemingly upon the suggestion of some member of the American colony at London, who was subsequently elected to a Corresponding Membership. But in the two gentlemen who have now been honored every requirement of skill, of merit, of eminence, of success in letters and science has been met.

* * *

DR. PORTER has had many honors conferred upon him, notably his re- and re-election to the General Secretaryship of the American Institute of Homeopathy. He is a Master of Arts, honorably earned in course, editor-in-chief of the *North American Journal of Homeopathy*, professor in the New York Homeopathic College, president of the New York State Homeopathic Society, and many other places of trust and grave responsibility, and latterly his election to fellowship in the French Homeopathic Society; all whereof attest his worth and popularity.

Dr. Dewey is a many times homeopathic author, formerly professor in the Homeopathic School at San Francisco, coeditor of the *California Homeopath*, afterward associated with the Metropolitan Post-Graduate School of New York (homeopathic), and now professor in the University of Michigan. He has held other, and, indeed, many, offices of trust in the American profession and in the American Institute. He was secretary of the American end of the International Homeopathic Congress which afterward met in London in 1896; and but for his persistent activity as such secretary there would have been a very small American representation at London—especially when it is remembered that several of the prominent American homeopathic journals had severely criticised the appointments of officers for the approaching Congress and the apparent indifference of that roster of officials to American papers and reports. Dr. Dewey is master of several languages, and is as familiar with Europe as with America, having spent many of his earlier years on the Continent.

WE violate no secret when we say now that we rebelled against the former appointments of the British Homeopathic Society, made, as it said, "for services rendered the congress to make it a success" (or words to that effect), mainly because that august society appointed absentees, as well as attending members of the American profession, some of whom were not known three hundred miles from their post office box, while they omitted Dr. Dewey, who had done a hundred times more service for and to the London Congress than all the other forty-one who went to London. That's where all our grievance lay. We are glad, therefore, to say that we withdraw all our former remarks touching this subject, and unite with the American profession in congratulating the British Homeopathic Society upon these two most excellent appointments.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

CLINICAL CONFIRMATIONS.

Borax IN DIARRHEA.—Dr. A. W. K. Chondbury⁹ reports the following:

Patient, Ekeem Dalâl, a Mohammedan male adult, a quack using native medicines, but a firmer believer in homeopathy, as he has attended my dispensary on many occasions, for his own as well as his wife's sake, with good effect. On this occasion he came to my dispensary on the 7th of December, 1897. His case is as follows:

Aggravation in the morning, after a meal or a breakfast; increase since about a fortnight; stools fermented, yellowish, slimy, with bad smell; head hot; pustular eruption on face, appetite not good; flatus hot; frequent urination; distention of abdomen by flatulence after meal; debility; cough, with thick expectoration, at the latter part of night till morning; threadworms pricking at the anus.

Given borax 6, two doses—daily a dose.

Remark.—Two doses quite restored his health; he reported thorough recovery by the two doses. Given sago for diet and allowed bathing.

Lycopodium IN CROUP.—The following case by Dr. W. P. Wesselhoeft elicited decided dif-

ferences of opinion at the Materia Medica Conference in 1897:

A child of five years every afternoon at four o'clock was taken with a severe attack of spasmodic croup. It lasted three or four hours, and then passed away; the child slept quietly all night. This had occurred for several days at this regular time every afternoon at nearly the very hour. The mental conditions of the child were entirely changed, which was especially marked after waking from sleep. It would cry on waking; it was extremely angry, and would strike or try to scratch the mother or attendant. I suggested to the attending physician that, on account of the mental symptoms and the marked four-o'clock afternoon aggravation, lycopodium seemed the remedy indicated. Now lycopodium has no croup symptoms, but no other remedy in the materia medica has in so marked a degree the mental symptoms on waking, and the 4 P. M. aggravation. There was no recurrence of a croup attack after a single dose of lycopodium in a high potency, and the temperament of the child became normal immediately. In this case the pathological condition, therefore, had nothing whatever to do with the selection of the remedy.

Colchicum IN TYPHOID.—Dr. J. R. Simson⁹ reported this: A man of nervous temperament had a very severe attack of typhoid. He was very wild, could not sleep, imagined his left half belonged to some other person, animals after him, would spring out of bed to get away, etc. And one peculiar and characteristic symptom was that his left pupil was contracted so as to be almost imperceptible, while the right was dilated the full extent of the iris. I was giving him the best indicated remedy I knew of. He had many symptoms which several remedies of the typhoid class have, except the eyes. I searched for days for a remedy with that symptom, and finally found it in the symptomatic indications of "Panelli on Typhoid Fever." Contraction of left pupil with dilatation of the right (colchicum) I found further symptoms corresponding with this remedy. I gave him colchicum, and he became better immediately, and slept until late next morning, and when he awoke was on a fair way to recovery. Now I fail to find that symptom in any materia medica or repertory.

Arsenicum AND CANCER.—Dr. J. J. Thompson says: "It seems curious that after so many well-authenticated cases are brought to light, still there are learned men who say that cancer cannot be cured by the internal remedies. I have now under my care a lady who some eight years ago had her disease diagnosed by Professor Hobart of Chicago as cancer of the uterus. He called Dr. Charles Adams of the same place in consultation, who pronounced it cancer and advised operation, without, however, holding out a very substantial hope of cure, so the advice was not followed. She was then put on the opium treatment to relieve pain, and at the time of Dr. Hobart's death was taking an immense quantity of opium daily. To-day she is not taking any opium, seldom complains of pain, and eight years after the first diagnosis of cancer there is very little enlargement of the uterus. She was under Dr. Hobart for three years, and he gave her arsenicum. Since then I have occasionally given her the same remedy in the 3d to the 30th potency. She is well, and presents no symptoms of cancer. I believe there are many to-day who could tell of similar cases.

Phaseolus, THE HEART REMEDY.—Dr. S. R. Stone sends us yet another verification of phaseolus, as follows:

In answer to a rush call I found Mr. T., æt. sixty-nine, in a semi-conscious condition, yet evidently suffering severely. Respiration labored; pulse fifty-one. The family informed me that at the beginning of the attack he complained of distress in region of heart; also that heretofore, during similar though lighter attacks, the pulse had always been very slow.

Phaseolus 6x, a dose every thirty minutes for three doses, then every hour, was followed by marked improvement. He spent a comfortable night, and the pulse was nearly normal next day, when the patient informed me that he could "feel every dose" on the previous day.

The remedy was continued once daily for several weeks, and patient reported at my office occasionally with a heart acting very nicely. Time only will tell if it prevents subsequent attacks. I have not yet been disappointed in the action of this remedy, and consider it a valuable addition to our materia medica.

MEDICAL MEMORANDA.

Tenaline.³¹—Tenaline is a new preparation recently prepared from the areca nut, with the object of retaining the tœniifuge alkaloids of arecaine, arecaine, and guvaine, and getting rid as far as possible of the very toxic principle known as arecoline. F. Hobday has been able to observe its effects and test its efficacy in rather more than sixty cases of animals, and concludes that tenaline is certainly of great value as a vermifuge, especially for tapeworms, in the dog and cat. It has the advantage over powdered areca nut of being much easier to administer, as its bulk is small, and a purgative is not a necessary adjunct. Its effect on ascarides is also well marked, as they may either be vomited up from the stomach or expelled in the fæces. Its action on the bowels is to increase secretion and stimulate peristalsis, so that even if no worms be present an animal which has received a full dose passes liquid evacuations. Above all, its general effect seems invariably to be to cause expulsion of the head as well as the segments, thus getting rid of the most troublesome part of the parasite. With reference to dose, that recommended is an allowance of 1 minim for each pound of body weight, and it is also advised that it should be administered pure, or with the addition of a little water. The latter was found to give the best results, the addition being made of an equal amount or rather more. That the results are better when water is added, especially where small doses of the medicine are prescribed, may be explained by the fact of its being necessary to give a sufficient quantity of fluid to reach and come in direct contact with the worm which is lying in the intestine. The dose mentioned may be doubled with safety. The tenaline is, however, toxic, for a dram killed a terrier weighing four pounds. It is unsuitable for subcutaneous use.

Atropine Poisoning.—Dr. Curtiss Ginn³² removed severe cataract from William D., aged sixty-seven. He was subject to so-called "bilious" attacks and used to outdoor life. Nausea and violent vomiting promptly followed the extraction, causing some prolapse of the iris and a subsequent iritis of a mild character.

A few drops of a four grain to the ounce solu-

tion of atropia was dropped in the eye. In the course of an hour an acute, violent delirium made its appearance, accompanied by great dryness of the throat, constant urging to urinate, and headache. His tongue also became so dry and clumsy that distinct articulation was impossible.

This condition began to leave him in four or five hours, but recurred when the dose was repeated in the evening. This time the action began to pass away in six hours, and the next morning the patient was mentally normal, with, however, no recollection of his actions or feelings the previous evening.

The druggist had given a four per cent. solution, instead of a four grain to the ounce, as ordered.

Arsenic, its Physiological Action.—Byrom Bramwell²² observed a case of pernicious anæmia in which there developed an herpetic eruption on the forehead during the arsenical treatment. Mr. Jonathan Hutchinson has directed attention to the fact that herpes zoster is in some cases apparently the result of arsenic.

The author calls attention to the great interest of this case, especially when it is remembered that arsenic is a specific in many cases of recurring herpes of the vulva and in pemphigus.

Schirlzern mentions the case of a fifteen-year-old child of a distinctly neuropathic tendency, with a history of articular rheumatism, who was suffering from chorea minor, the spasm involving the left sterno-mastoid and splenius capitis. Ascending doses of Fowler's solution were ordered until very large doses were taken. At the end of thirty-two days as much as 2 drams had been ingested, when the patient developed herpes nasalis, and, a day later, a chill and high fever with herpes labialis, and laryngealis and paræsthesia of one side of the head.

Primula Obconica Proving.—Dr. E. V. Ross¹ collates the symptoms of skin eruptions produced by this primula as found in various journals (among them the AMERICAN HOMEOPATHIST, 1897, page 429). He arrives at the following conclusions :

From symptoms Nos. 5, 6, 7, 8, 14, 15, 23, it would appear the time of aggravation is at night, and the most prominent sensation is itching and less prominent is burning. This is characteristic

of the arsenicum eruption, also of anacardium, rhus tox., and some others. The eruption also bears a strong resemblance to these remedies, and, if one may judge from the symptoms enumerated, ought to prove a potent rival in erysipelas and eczematous complaints. Rhus poisoning will no doubt find a new and efficient remedy in primula, and here let me state our experience in the treatment of the latter's complaint. It has been our fortune to see and treat a number of these cases. Rhus radicans (500) is our chief reliance, and in majority of cases it has proved all-sufficient, its action being prompt and decided. Where there was deep infiltration of the tissues, giving the integuments a board-like feel, and accompanying the inflammation and swelling from the start, or remaining after the more acute symptoms have subsided, anacardium orient. 500 and 47m has rendered us excellent service. When the eruption is pustular, and the pustules coalesce, forming thick scabs or crusts, we prefer ledum pal. 500 (Tafel) and 1000 (Skinner). In a few cases we have been compelled to resort to other remedies, but the majority of poisonings from ivy can be promptly antidoted by these three remedies.

Further information regarding this drug is desired.

HYDRASTIS CANADENSIS.*

THE physiological effects of toxic doses of hydrastis are worthy our consideration. When so given it will cause flashes of heat with intense itching, followed by a moist eruption of an erysipelatous nature. This usually occurs on the face, around the mouth and chin. The eyelids are swollen and congested, secreting a thick white mucus. Dimness of vision is a frequent annoyance. It causes inflammation of the nose, with a discharge of thick white mucus, frontal headache, roaring in the ears, and otorrhœa. It has a decided influence on the mucous surfaces. The natural secretions are at first increased in quantity, always thick and tenacious, resulting in ulceration and destruction of the secreting glands which leave the mucous membrane in a dry and harsh condition. This drug acts through the

* From a digest of paper by Dr. A. W. Forbush, published in the *Félicite Med. Gleaner*.

ganglionic nervous system principally upon the mucous membrane of the outlets of the body, less strongly on the outer integument, considerably on the glandular system, very slightly on the muscular, and, apparently, not at all on sympathetic nervous tissues.

Under the influence of hydrastis most persons complain of a feeling of intoxication, with sharp cutting pain in front part of the brain; this is probably a reflex condition from the disturbance of the digestive tract.

Hydrastis is specially useful in the treatment of chronic catarrh of mucous membranes wherever situated; the acute inflammatory form being the only one not receiving benefit.

Old nasal catarrhs, when the discharge is thick, tenacious, stringy, and profuse will be much improved by its exhibition.

In chronic tonsillitis and chronic pharyngitis, where exposure to cold and wet aggravate the symptoms, hydrastis will cure.

In diphtheria proper it is of no service, but if the secretions cling to the mucous surface, closely resembling diphtheritic exudation, hydrastis is the one drug to be remembered.

In difficulties arising from atonic states of the stomach it is unsurpassed. It is also useful in that debilitated and congested state of the intestines whose chief expression is constipation. Where this results from sedentary habits, hydrastis will be a complete success. The stool which indicates hydrastis is hard, dry, and nodulated.

In ulcerative catarrh of the bladder, frequently found in the cachectic patient, hydrastis alone will prove curative.

In gonorrhœa, after the *acute stage* has passed, and in leucorrhœa, without *inflammatory* symptoms, attended by a thick tenacious yellow, or green discharge, hydrastis is the one remedy excellent.

Hydrastis, with or without nux., will be found of special advantage in gastritis resulting from the abuse of alcoholic stimulants.

In general it is indicated in all affections of the mucous surfaces; correcting abnormal conditions characterized by *profuse* discharge of tenacious mucus, sub-acute inflammations, erosions, and *superficial* ulcerations.

Phil. Mo. 30.

The Hahnemannian Monthly:

Far better and more efficient, both as a palliative and curative [in Stomach Worms], than all other remedies is the old-fashioned "Elixir Pro." (myrrh and aloes) of our fathers. A teaspoonful of this in two tablespoonfuls of water, well sweetened and given before breakfast, on three successive mornings, effectually disposes of the attack, and soon eradicates the tendency. The only positive diagnostic symptom [of stomach worms] is swallowing during sleep. If it is present, worms are there. If it is absent, they are not there.—*W. S. Searle.*

The North American Journal of Homeopathy:

Abnegators and nondescript journals may preach a spurious peace, but there can be no peace until the articles of agreement are honorable to all. Invitations to abnegation are offensive, and may be accepted only by renegades. Does any man of sense believe that the homeopathic school would abnegate its principles, deny the truth of similia, submit to repression in practice and speech, simply to have the distinguished honor of sitting on the back benches of the allopaths? No one but sophomores of the first water would indulge in such senseless fancies, and yet that is the plan proposed, in the name of progress, by a nondescript journal.—*E. H. Porter, Editorial.*

The Medical Visitor:

Is it possible there are educated men who would be willing to be guilty of such work as would deprive a brother practitioner of the right of moving because, forsooth, in after years he has forgotten a little of anatomy, a little more of physiology, and still more of chemistry? Not a single man or woman advocating such a law would for a moment consider it if every physician in this State had to stand an examination before he would be permitted to continue practicing. IT IS NOT DEMANDED BY THE PEOPLE. That one thing is as evident as the fact that the sun shines. . . . Regulate the medical colleges whenever it is necessary, and no one will say nay. But after a young man has put in four years at a good school, has passed the examination of the faculty, and has been pronounced

capable of practicing medicine, do not say that he can not.—*W. A. Smith, Editorial.*

The Pacific Coast Journal of Homeopathy:

In the spring of 1895 I was called to see J——, a painter, aged sixty-two years, who was suffering with lead colic. After making him as comfortable as I could, I left him with medicine, and returned in the evening to find the colic much relieved, but said he wanted some medicine for his kidneys. On inquiry, I found he was suffering constant desire to urinate, which was difficult and attended with strangury; was obliged to get up several times every night, and said he had been suffering this way for several weeks. On examination, I found he was suffering with senile hypertrophy of the prostate. While inquiring into his habits I found he was a constant user of tobacco, smoking some, but chewing constantly all day long, if his work was where he could. He told me he had used it to excess for fifty years. I assured him it was no doubt an injury to him, and his wife asked me to give him something to prevent his using it. I told them I would consider it, and left him some saw palmetto ϕ , to be taken 15 drops three times a day, for the prostatic trouble, and thought no more of the tobacco business. About a year afterward he met me on the street and wanted to know what the medicine was I gave him, saying it was the most wonderful remedy he had ever taken. I asked him why he thought so, and he said he had never had any desire for tobacco since taking it. In talking with him a few days ago, he asked me if I did not, at the instigation of his wife, give him the Keeley cure for the tobacco habit!

Now what was it? "Suggestive therapeutics?" or was it saw palmetto.—*Vernon W. Stiles.*

The Minneapolis Homeopathic Magazine:

And still the discussion concerning the management of our national organization goes merrily on. Many of our seniors, whom we all revere, have risen to declare most emphatically that there is no truth in the charges made, and to affirm with equal emphasis that the Institute is and always has been conducted for the greatest good of the greatest number. Others, however, are candid enough to concede that

there may be room for improvement, and show a disposition to acknowledge the force of the old saw that where there is so much smoke there must be some fire. Meanwhile our periodicals are distinctly benefited by the discussion. The breath of life has been breathed into more than one journalistic corpse, and some of our monthly funeral processions have been done away with, at least temporarily. Verily, there is no loss without some gain. And there is still the further prospect that the thunder storm which now seems to envelop our national body will result in a clarifying of the atmosphere which will in the end not only reoxygenate the present sluggish blood current of our representative organization, but also furnish a little fresh ozone for all of us. On the whole, there seems to be no cause for sorrow in the present outlook.—*H. L. Aldrich, Editorial.*

The Hahnemannian Advocate:

Dr. M. O. Terry, a surgeon of great prominence, makes the statement in the *Medical Times* for November that in fifty-one cases of appendicitis he has treated forty-nine exclusively with internal remedies and been compelled to use the knife in but two cases. He believes that the appendix has a very important mission to fulfill. That it is intended by its position, and by its unusually large solitary glands, to act as a lubricating can for the ilio-cæcal valve, thereby tending to keep the fæces thoroughly lubricated, and thus facilitating their passage through the intestines. Acting upon this theory, as soon as he comes to a case presenting the characteristic indications of appendicitis with evidence of unnatural dryness of the intestines and consequent impaction of fæces, he gives a tablespoonful of castor oil with two tablespoonfuls of sweet oil, followed by a glass of hot water; this is to be repeated in three or six hours, according to the urgency of the case. In connection with this treatment colon enemas are used every three or six hours. In the first instance four ounces of glycerine is injected, followed by bicarbonate of soda and water, using one dram to a quart of water. In subsequent enemas six to eight ounces of sweet oil injected after the enema of the water, the patient having the hips well raised. Fomentations of flaxseed

poultices are kept applied to the abdomen, and hot sweet oil is poured over the abdomen before using the same. The skin and abdominal muscles will rapidly relax under the oil, fomentations, and heat. This reduces the inflammation and prevents gangrene of appendix. Internal indicated remedies may be selected for the individual peculiarities of each case.—*H. W. Pierson, Editorial.*

The Homeopathic Physician:

No remedy in the materia medica is more surprising and more clearly shows the genius of Hahnemann than silicea. That the "everlasting rocks" can be used as medicines seems incredible and absurd. Silicea has been a stumbling block with many to the acceptance of the homeopathic doctrine. It has been argued that if rock can withstand the weather for centuries, it is incredible that it can be used as a medicine. It must be inert, and therefore cannot influence the human system. . . . The weather does disintegrate the rocks. . . . Silicea as a medicine is not made by simple trituration of sand in a mortar with sugar of milk . . . read Hahnemann's *Chronic Diseases* . . . these directions are to fuse pure quartz or rock crystal with soda, in a crucible. This makes a glass which is soluble in water.

The Critique:

It was with no little regret that we discovered the omission from the [Am. Inst. of Hom.] transactions for 1897 of the report on vital comparative statistics made at the Buffalo meeting. This report of Dr. Strickler and his committee covers a period of five years and represents the arduous, painstaking efforts of about thirty members of the Institute. The work accomplished is of the highest importance to our school, and the results ought by all means to be preserved in permanent form in the published transactions.

[And there are others: notably the absence of the Dunham College "incident," also that thirty-eight-year homeopathic practitioner's abnegatory speech.]

The Medical Century:

The second vice-president—by courtesy—of the American Institute of Homeopathy has trumped up some sort of charge of misfeasance

in office against the recording secretary, and proposes to ask that body to discipline the alleged offender. Not content with continually indulging in journalistic and personal warfare against his brother editors, he presents the unwelcome spectacle, immediately upon his induction into the office he holds, of asking the body which has honored him to transform its forum into an arena wherein he may indulge in a specious warfare upon a fellow officer, who happens to be, also, a journalistic frater. It is not often that such an altogether offensive exhibition of a lack of appreciation of the eternal fitness of things is witnessed. Once the doors of the Institute are opened to this sort of thing the atmosphere would soon become too sulphurous for comfort. The body would indeed assume a difficult task, were it to consent to become the arbiter of the contentions and woes of its journalistic members. The simile of the Kilkenny cats would apply but faintly to the possibilities of the situation. . . . The Institute is nobody's laundry. The more emphatically this fact is made to be understood the better.—*C. E. Fisher, Editorial.*

The American Medical Monthly:

The agitation of the question whether or not the seniors have mismanaged the affairs of the Institute, will in the long run do no harm, because we believe it will emphasize the fact that the Institute has been drifting to a greater or less extent into habits of political chicanery, and that the idea of rendering "honor to whom honor is due" has not become a cardinal principle of the Institute. That the seniors or any other less venerable members of the American Institute have been guilty of deliberate mismanagement for the sake of personal aggrandizement, or to advance the interests of any individuals, we do not for one moment believe; but of course it is possible that the best executive officers have not always been selected, and that the best legislation has not always been enacted by those who have had in hand the affairs of the Institute in the past. On the whole, however, we think the Institute has done very well in the past, and if we can avoid the shoals and rocks of political chicanery, haste to be great, and a few other minor dangers, and if each member

will do his or her duty and let the duty of others alone,* there is no reason why the Institute may not continue to prosper and grow in greatness year by year.—*E. C. Price, Editorial*

The New England Medical Gazette:

In the struggle for personal existence, and gratification of personal ambitions, one's thought, sympathy, and help do not go out to its [Boston University School of Medicine] support as they should. Nevertheless, in so far as it stands today, with the hospital as a monument of the success of homeopathic ideas and sympathy and support, just so far is it the duty of the profession and its friends to encourage, to help, and to support it. The scientific study of medicine, *the scientific study of homeopathy*, has grown so rapidly, has broadened so immeasurably, that the time is already here when the proper and best teaching by a professor or instructor in a university cannot be satisfactorily done by time taken from professional duties, exigent upon a large practice. The necessities of teaching require a large part of and in some chairs the whole time and brain of its occupant; and to this end it is necessary that an institution of this kind, equally with other schools devoted to the higher education, should be *endowed*, and *liberally* endowed.

By the interest and energy of the profession, and by the munificence of its patrons and friends, the homeopathic hospital has been placed, to say the least, above the plane of penury. Let us urge, then, that the same energy and liberality which have accomplished so much for the hospital be aroused to the needs and to the support of the medical school.—*Editorial*.

The Medical Advance:

It was isopathy, not "pure homeopathy," to which the inter-collegiate committee objected and on which the unfavorable report was based. It was for *not teaching* homeopathy, *pure or impure*, that a certain medical college was denied fellowship or recognition by the American Institute of Homeopathy. Neither was it because of its youth and inexperience, as set forth in a series of resolutions passed by the Des Moines (Ia.) Homeopathic Medical Society, for at

the same session a college more recently organized received recognition. Neither was it "persecution," for application for this same recognition was made a year previously and referred to a sub-committee, that a thorough investigation of its teaching and standing might be made. Oh, no! It was not malicious. There is "something rotten in Denmark," and the committee was frank and honest enough to so report.—*H. C. Allen, Editorial*.

[Sir? How does the *Medical Advance* know all these things? There is not a word or a whisper of a word concerning Dunham College in the American Institute Transactions for 1897. All that the profession knows now concerning the controversy is the report of that sub-inter-collegiate committee which appeared in the *Hahnemannian Advocate*, which report is not now and never has been denied! And upon *that* report the profession rests its decision! Read it again, *mr. Advance*, and then say what business that sub-committee had to define homeopathy for Dunham, and not for Hering: what business it had for referring to the number of professors of Dunham who are not members of the Institute, any more than it had to do the same not-malicious thing for Hering, or Pulte, or the Cleveland Homeopathic; what business had it to refer to fads in Dunham, when the members of the sub-committee, with one honorable exception, live in exceedingly brittle glass-houses. If Dunham is knowingly doing that which is unhomeopathic, or unprofessional, let the committee come out in the open with it, so the Institute and the profession at large—many of whom have students in that college—may know what it is and give its decision accordingly. If that sub-committee or its full committee, voted (*ex post facto*) to suppress all mention of that sub-committee's report in the Transactions, then we fail to see how it has bettered its standing with the profession. Suppressing that report after attention was called to its exceeding puerility by the homeopathic press is patterning after the ostrich: the head is in a hole but the other parts vividly visible. To damn a homeopathic college in star-chamber, and then suppress the proceedings lest an aroused and indignant profession condemn the process, smacks very much of the Dreyfus investigation. Does not

* Dr. Price has here no reference to the self-appointed duties of the incumbent second vice president.—EDITOR.

the quoted article give color and form to our former charge that the Dunham fight was engineered from Chicago, and for distinctly Chicagoese purposes?—EDITOR.]

The Medical Counselor:

There is no one thing which more prejudices the profession against the church and the clergy than the wholesale recommendations given by "eminent divines" to the various dishonest substitutes for good whisky advertised as bitters, compounds, and the like. Chemical analysis of all these has shown that they contain anywhere from seven to thirty-three per cent. of alcohol. A hard-worked physician who spends from a fourth to half his time in charitable attendance upon the poor—many of them made so, perhaps, by King Alcohol—can listen with feelings of disgust only to sermons of temperance and moderation from the "noted preacher" whose name and face he has seen in the morning paper recommending a preparation which analysis has shown to contain twenty-five per cent. of alcohol.—*S. H. Knight, Editorial.*

SOME EXCELLENT DON'TS.*

DON'T forget that a bag of shot at wrist often stops bleeding from the hand.

Don't forget that "asylums are cemeteries of unexecuted morbid influences."

Don't anæsthetize a female unless a third reliable person is present.

Don't use vaginal washes in normal labors. Use them only when temperature is elevated. Never allow nurses to use them *ad libitum*.

Don't agree to cure syphilis under two years.

Don't sound the bladder. Only dilate the urethra.

Don't call herpes chancre.

Don't permit nervous and foolish mothers to remain in the room when operating on their children.

Don't give alcohol in disease. Remember the twenty-five years' experience without it in the Battle Creek Sanitarium.

Don't permit patients with cardiac disease to ride a bicycle.

Don't imagine that harm cannot be done with a curette. If you cannot use a sharp, don't use a blunt, one.—*Sims.*

Don't forget Prewitt's definition of an amputation: "confession of failure."

Don't forget that injuries to thumb and little finger are of more serious prognosis than injuries to others.

Don't fail to know the pelvis of your lying-in patient as you know her face.

Don't fail to elect version as preferable to high forceps when head is above the brim.

Don't do symphyseotomy to save life. A fetal mortality of 15 per cent. is not a life-saving operation.

Don't forget that the semi-recumbent position (as practiced and learned from the North American Indians) is the best in labor.

Don't forget that bottle-fed infants are subject to scurvy, and that the three prominent symptoms are: (1) bleeding gums; (2) swollen and tender thighs; and, (3), purpuric spots.

Don't examine females or males without hermetically sealing all fissures. Social standing does not render one proof against pox.

Don't forget that bicarbonate of soda dissolves earwax.

Don't fail to suspect syphilis if "sore throat" persists five or six weeks; lift up uvula and look for the ulcer.

Don't open a belly to clean uterus out when a good dilator and a sharp curette only are required.

Don't forget the claim made that "infantile hiccoughs is an indication of hereditary syphilis."

Don't promise much in aortic regurgitation.

Don't operate on umbilical hernia in the female. It always kills.

Don't forget that digital chancres are especially dangerous and that they are most common among doctors.

Don't forget the dangers of cocaine when used in the eye.

Don't forget that the great surgeon Gross placed his property in his wife's name. A "charity" negro once sued him for amputating his valuable (?) arm.

Don't permit a syphilitic to marry before seven years, nor gonorrheals either.

*From a paper by Dr. Luther C. Toney of Bisbee, Ariz., published by the *Pacific Medical Journal*.

Don't give ergot before the uterus is empty.*

Don't forget that the best anti-gonorrheal remedy is the strict observance of the seventh commandment.

PNEUMONIA CURE.

A MORNING paper announces, with the usual portrait accompaniment, that a modest New York doctor, with a Swedish name, cures pneumonia! Remarkable, isn't it? How does he do it? He draws a certain quantity of blood from the arm of the pneumonic victim, cooks and otherwise chemically prepares this blood, and reinjects it into the patient. And, *voilà!* the patient makes a rapid and uneventful recovery! But the drawing of blood as a cure for pneumonia is not a very new or startling device, as every American schoolboy knows—instance the death of General Washington. What always pleases this editor in reading and studying these marvelous mare's-nests in the morning papers, with large wood-cut portrait of the founder, is that these journals never picture the face nor give the name of a homeopath. It may be argued from this that the homeopath is an unprogressive and unscientific professional member. If that be true, then the homeopath is guilty of a most excellent fault. For there is surely nothing more repulsive to the profession of medicine than the unseemly newspaper notoriety which here and there some ethical member of that iron-clad school of ethics—the allopathic—foists upon his brethren and friends. To come back to our mutton: the number of homeopaths who cure pneumonia is legion!

THE MATERIA MEDICA CONFERENCE.

WE are sincerely of the opinion that at the next meeting of the American Institute of Homeopathy, the *materia medica* prefix may be omitted with profit to everybody.—*The Critique.*

Yes? But, dear Brer Smythe, what will that Renovating and Investigating Committee do after that? They have but just got started, and see what an amount of trouble they have already stirred up? Think of the infinite possibilities of

harm that could be hammered out of another session or two of that committee. But all satire aside, we too are and have been for some time of the opinion that the purpose for which this conference was called into existence has failed of its intent; and that continuance of the conference very much longer will serve only to further obscure the original purpose. If that alone were not a good reason, then the fact that it is despoiling the proper *materia medica* section of the Institute of its *raison d'être* ought certainly to govern. If neither of these reasons weigh, then why not have a gynecological conference, or a surgical conference, in order to thrash over all the old straw of a century or two and to cast doubt and derision on many of the accepted forms of technique embodied in the craft. The current progress in any profession or trade is sufficient to keep that profession or trade in the front rank, without necessitating a conference at stated intervals to overhaul the records of a generation or more and note the changes that have been made.

ALAS, POOR GENERAL PRACTITIONER!

WE learn that a New York surgeon has by a skillful operation altered the shape of a man's head, presumably for the better. In another journal we note that a distinguished foreign surgeon does not hesitate to cut down on the liver and remove parts thereof in his efforts to ablate tumors, cancers, and other foreign things, much as the scientific gynecologist takes out ovarian cysts in the majority of cases which come to his speculum. Then there was that famous case, somewhere in the Alps, of the woman whose stomach was successfully removed while she continues to live on and on in fairly good health, an honor and joy to herself and a standing advertisement of the surgeon. Now comes the later intelligence that some non-advertising surgeon of one of the Germanic nations, and necessarily a member of the old school, has discovered a sure thing for the procreation of sex at will! Yet the poor, obscure general practitioner, who outnumbers the surgeon a half-dozen times over, and who really keeps the human race in existence, must continue to plod along at half-past two in the morn-

* Don't give it then if you are a homeopath; give the properly indicated remedy and avoid all the other dangers of the mechanical action of ergot.—EDITOR.

ing, rain, mud, slush, or snow, treating the old, old-fashioned diarrheas, constipations, stomach-aches, backaches, liver complaints, measles, scarlet fevers, whooping coughs, etc., etc., etc., with the old, old-fashioned, many-times-tried and successful hundred-year-old homeopathic materia medica (full of chaff), for which he sometimes gets his pay, but in innumerable instances does not get even credit. If he could but emulate his specialist brother, the surgeon, or the surgeon's still later and more aristocratic offshoot, your modern and progressive gynecologist, and call these world-old complaints by long Greek and Latin names, and so add to his bill for services! Verily, verily, the ways of the poor general practitioner for gaining notoriety and buncombe are meager indeed!

CHLOROFORM GIVING.

WHEN one reads in the reading notices of some of our contemporaries that Dr. This or That has devised a very convenient and compact little apparatus for the giving of anæsthetics without the need of an assistant to watch the giving, it moves the physician to ask where that doctor-inventor has learned his profession? As almost anyone knows who reads, it is not the absolute quantity of chloroform that is taken that produces the danger, but frequently the very first whiff which stops the action of the heart. The careful physician and surgeon knows full well that the giving of any anæsthetic is at all times a most dangerous bit of business, and he would never consent to its administration without the presence and assistance of some brother of the profession to give aid in time of need and to share the responsibility in the event of trouble. Of all the patented devices for administering chloroform that are in the market, there seems to have been nothing better invented than an inexpensive clean towel, properly folded into a cone, and this held in the hand of an intelligent assistant. The automatic anæsthetic devices, requiring no one present but the operator and the victim, are uniformly dangerous both to the patient and the doctor* and should be discountenanced by the profession.

Talking about chloroform reminds us to ask

if anyone has ever known of a man or woman while sleeping in an ordinary bedroom being drugged into unconsciousness by the throwing on the floor of that room of a sponge saturated with chloroform? Yet we read very often of robberies taking place under such circumstances. After a person has witnessed the desperate struggle (apparently) of the patient, who is having the chloroform held close to the nose and mouth by trained assistants, and the time it takes in many cases to render him unconscious, the chloroform-drugging story will not down.

SIX SONS FOR PALL BEARERS.

AN account of the death of Dr. Alonzo S. Hinkley,* one of the oldest homeopathic physicians of Buffalo, after speaking in terms of deserved praise of the departed, closes with the line: "No strangers carried the coffin, the six sons of the well-known physician acting as bearers."

Ah, the beauty and glory of it! In this progressive and degenerate generation where will we find another such instance of "six sons"? The household of to-day, in America, which boasts of two living children believes its whole duty done. Children-having, among the "better" class, is out of fashion. Obstetrics is relegated to a subordinate place in modern life. We leave that to the foreign element, to the "assisted," and to that other element in our political economy which has not yet learned all the devious ways of the brothel. And now another fool-legislator in Ohio proposes a tax on babies! Only a few weeks ago his brother retardist proposed the medical examination of all applicants for marriage!

THE CRITIQUE EXCURSION.

THE (Denver) *Critique* gives notice of an excursion through the Rocky Mountains, following the close of the Institute sessions. The excursion is for doctors and their friends. It will leave Omaha one evening and reach Denver next morning; thence to Colorado Springs, Manitou, Garden of the Gods, etc. It will take in Glenwood Springs, Salt Lake City, and

* Criminal prosecution.

* The *Hospital Leaflet*.

Ogden, and return via the Union Pacific Railway to point of starting. Trip will consume about a week and will cost \$60 for transportation, sleeping car, and dining car for entire time. Send \$10 at once to Dr. J. Wylie Anderson, 16 Steele Block, Denver, Colo., and so engage your place. It will be a doctor's outing from start to finish, and at such small cost that you can afford to go. Time will be given in each of the larger cities to see all the points of interest, and as our *Critique* friends have charge, nothing will be left undone, we are confident, to make the trip one of pleasure as well as of profit.

A PATRIOTIC MOVE.

THE Illinois State Homeopathic Society and the Missouri Valley Homeopathic Association have agreed to hold no spring session, in order the better to join forces with the American Institute of Homeopathy and make the latter an unqualified success. Now, why isn't this a good idea? And what other societies will follow suit? The president and secretary of the Missouri Valley Association have put this suggestion into circular-notice form, and request every member to attend the Omaha meeting.

READING BY TITLE.

ONE blessed result of the agitation by the homeopathic press a few years ago of the evil of reading absentee-"foreigner's" papers by title only has resulted in a wide correction of the evil. We hear but little of that former method of conducting State societies. When an absentee-"foreigner" now accedes to the secretary's request and furnishes a paper it is coupled with the distinct understanding that it will be read in full. This is as it should be. An active member of his State society should attend; if he does not, *his* paper ought to be read by title. But after padding the programme with the names of eminent practitioners, who the secretary well knows at the time of importuning cannot and will not attend the meeting, it is wrong to drop that contribution in the waste-basket.

The excretion of potassium is markedly diminished (one-half or one-third) in Bright's disease. The elimination of the element is favored by a milk diet.

OMAHA AND THE INSTITUTE ADVERTISERS.

WE are informed by Dr. W. H. Hanchett that the Local Committee is perfecting arrangements for making the 1898 meeting the largest and best the American Institute of Homeopathy has ever held in its history. The dates are from June 23 to 30, inclusive, giving the best opportunity for those who wish to advertise medical goods and supplies of all kinds before the medical profession of the United States. The local committee of arrangements has secured the new Creighton Medical College as a place of meeting, which is within two or three blocks of all the largest hotels in Omaha. It is a magnificent structure, well arranged for medical meetings and the exhibition of medical goods and supplies. No manufacturing firm supplying the profession can afford to be without representation before this great body of doctors. Those wishing space may secure it by addressing the Chairman of the Committee of Concessions and Exhibits. W. H. Hanchett, M. D., Chairman of Committee of Concessions and Exhibits, 446 Bee Building, Omaha. This committee would also be grateful for the names of any firms who would like space for the display of their goods.

THE APPLE AS A USEFUL MEDICINE.

By A. ATKINSON, M. D., Baltimore, Md.

PERHAPS the strangest medicine for diabetes is the apple, the sourer the better. A diabetic patient in Lancaster County, Pa., used a great deal of cider. He voided large quantities of urine, but he soon found that the sweet cider produced too much sugar, and was compelled to discontinue its use. Thus we see that the cider consists of only the juice of the apple, yet every kind of cider will not answer in diabetes. This gentleman makes one-fourth of his diet now consist of raw apples. He often uses them to the exclusion of all other food. He prefers, as best suited to the non-formation of sugary urine, the so-called Smokehouse apple, which is very tart—that is, it is full of malic acid, without the accompanying sugar we find in the Sweetening and other apples commonly with green or yellow skins, like the Yellow June apple. When this Smokehouse apple is fresh (green) from the tree it bites the tongue from its excessive tartness, making fissures in the mucous membrane. Mr. L. uses as many as a quarter of a peck of these apples each day when they are in season. It is not an apple that keeps

well; as it ages it loses its sourness, and does not serve him then as food capable of averting sugar. A gentleman of Wilmington, Del., a diabetic, is on sour apples when they can be had, and he thanks Mr. L. for his improvement during the season of sour apples. Mr. — of Lewisburg, Pa., was also benefited by apples.

The *Hospital*, a London paper, says: "Chemically the apple is composed of vegetable fiber, albumin, sugar, gum, chlorophyll, malic acid, gallic acid, lime, and much water." Furthermore, the German analysts say that the apple contains a larger percentage of phosphorus than any other fruit or vegetable. This phosphorus is admirably adapted for renewing the essential nervous matter, lithlein, of the brain and spinal cord. It is, perhaps, for the same reason that old Scandinavian traditions represent the apple as the food of the gods, who, when they felt themselves growing feeble and infirm, resorted to this fruit for renewing their powers of mind and body. Also the acids of the apple are of signal service for men of sedentary habits, whose livers are sluggish in action, these acids serving to eliminate from the body noxious matters, which, if retained, make the brain heavy and dull, or bring about jaundice, skin eruptions, and other allied troubles. Some such experience must have led to our custom of taking applesauce with roast pork, rich goose, and like dishes.

The malic acid of ripe apples, either raw or cooked, will neutralize any excess of chalky matter engendered by eating too much meat. It is also a fact that such fresh fruits as the apple, the pear, and the plum, when taken ripe and without sugar, diminish acidity in the stomach rather than provoke it. Their vegetable salts and juices are converted into alkaline carbonates which counteract acidity. A good ripe, raw apple is one of the easiest of vegetable substances for the stomach to deal with, the whole process of its digestion being completed in eighty-five minutes. Geffard found that the "pulp of roasted apples mixed in a wine-quart of faire water, and labored together until it comes to be as apples and ale—which we call lambswool—never faileth in certain diseases of the vaines, which myself hath often proved, and gained thereby both crowns and credit." "The paring of an apple, cut somewhat thin, and the

inside whereof is laid to hot, burning, or running eyes at night when the party goes to bed, and is tied or bound to the same, doth help the trouble very speedily, and contrary to expectation is an excellent secret." "A poultice made of rotten apples is of very common use in Lincolnshire for the cure of weak or rheumatic eyes. Likewise in the Hôtel des Invalides of Paris an apple poultice is used commonly for inflamed eyes, the apple being roasted and its pulp applied over the eyes without any intervening substance. Long ago it was said apples do easily and speedily pass through the belly; therefore, they do mollify the belly. And for the same reason a modern maxim teaches that 'To eat an apple going to bed, the doctor then will beg his bread.'"

Sweet cider to which the powdered carbonate of iron has been added, say $\frac{3}{4}$ j to the gallon of cider, makes an admirable hydrogogue tonic (chalybeate), useful in all forms of dropsy and easily tolerated in Bright's disease, the iron making up for the debility which the watery purgation would without it have induced, and the writer has found the addition of salicylate of sodium to the above mixture to be useful in rheumatic attacks.

Fruits were given us before drugs, and they all have some medicinal virtue. Prunes, apples, pears, figs, peaches, are all aperient, and how much better it is to keep the liver and bowels free from clogging by pleasant laxatives than by resorting every few days to drastic saline purgatives, or to calomel and its varied compounds. Fruits do not debilitate by excessive purgation, but only induce soft stools, which empty the intestines, while they soften the biliary secretions. In cities the inhabitants are only beginning to appreciate the health value of fruits, and now the markets and provision stores supply them at moderate figures. They counteract the heating effects of too much salt meat, and help to digest our overstarchy foods.

At a late session of the Paris Hospital Medical Society, Thoinot reported the case of a man who ruptured his aorta in a fit of anger and died a few hours later, after suffering acutely from the pressure of an enormous subpleural hematoma upon the celiac plexus.

Globules.

Dr. E. Lippencott of Memphis died March 22.

The Kansas City Homeopathic Medical College held its Tenth Annual Commencement on March 24. The College Address was delivered by Rev. J. Stewart Smith.

Lipton, who has been for many years closely associated with the medical fraternity through his food productions and his large charities to medical institutions, has been made a knight by the English queen.

Instead of a banquet this year a \$100 donation to the Hahnemann Monument Fund will be made in the name of the Class of 1898 of Pulte Medical College. The faculty of the College will also send \$100. Thus far Pulte Medical College has donated about \$400 to the Monument Fund.

We hear naught but words of praise for the new *Homeopathic Journal of Surgery*. It certainly fills a long-felt want—using that trite expression for once properly—and will secure the support of the whole profession, regardless. And since the editor, Dr. Fisher, has been called to Hahnemann (Chicago), we cannot but believe that it is a deserved recognition of his many services in the field of clean homeopathic journalism and teaching.

Some manufacturers, like the Antikamnia Chemical Company, and the Imperial Granum Food Company are making conscientious efforts to keep the people from buying their products except upon the advice of physicians, are rigidly excluding their advertising from the general public—and so deserve the hearty support and encouragement of the medical profession. Of some others, who are reaching out for the "dear public" as well as the "dear doctor," as much cannot be said.

We are in receipt of the first number under the new management of the *Clinical Reporter*, with Brer Foulon once more wielding the editorial pen. It is, as yet, too early to note many changes for the better; but we feel confident that our "old" professor and again-editor will be heard from soon in his former eloquent and instructive way. Having lived in St. Louis and being familiar with its surroundings we would like to suggest to our brother that he add the word "Illinois," after East St. Louis in his address, and so avoid many lapses from correct English when exchanges and books get lost—the senders supposing East St. Louis to be a little suburb of St. Louis.

A Missouri girl recently had a cataract burned from her eye by the popping of some hot grease in her face and eye. She bandaged the burn for a few days with tea leaves, and on removing the bandage found she could see as well as ever.

I would remind you of Sir James Paget's too often neglected statement, that we ought to examine patients for operation with fully as much care as we do for life insurance; and add to it, that if this examination be so conducted we shall often find that which will make us hesitate and prepare them before subjecting them to enhanced risk of what may in other respects seem for their good.—*Roswell Park*.

The *New York Medical Record* of a recent issue contains a reprint from the Cincinnati *Lancet-Clinic* concerning the anti-toxin, which gives the bar sinister to this much-vaunted cure for diphtheria. "Like the rest of serious maladies to-day treated by serum therapy, it is necessary to recognize the fact that such medication no longer keeps the promise made in its name . . . [there are] serious and frequent accidents to which the anti-diphtheritic serum gives rise when applied to even very simple cases of angina." *Et tu, Brute!*

The Chicago Homœopathic Medical College asked the honour of our presence, etc., at the Twenty-third Annual Commencement, March 22. We are very fond of the Chicago Homeopathic: it numbers on its roster very many of our personal friends; and it is noted—the college is—for keeping its promise to the student and the profession. The engraver of the invitation doubtlessly argued that if homeopathy must go back a hundred years for its spelling, it was proper to spell "honor" in the same hundred-years-old fashion.

Dr. Bullitt, in the *American Practitioner*, advises the treatment of gastralgia and dysmenorrhea by topical applications to the nose and more nasal surgery. In both these diseases he says there is a nervous element which can be best relieved by treatment of the anterior third of the middle turbinate on the left side, and cured by the removal of the bone. The truth of this statement he avers may be proved by painting this portion of the turbinate with a 20 per cent. solution of cocaine when the oncoming pain of a dysmenorrhea is relieved in from five to eight minutes.

The instance spoils the argument. A 20 per cent. solution of cocaine, applied to the sensitive nasal membrane, will cure most any disorder of the body; as a full hypodermatic of morphine will cure, for the time being, a host of incurable ailments.

Send that postal card immediately to Mr. B. Silloway, proprietor of the New Murray House, Omaha, and secure a good room. It's a first-class house with prices to suit.

The Materia Medica Conference will have but one session this year at Omaha, and that will be held in the morning hour of the regular opening day of the American Institute of Homeopathy. It looks as if the special work for which this Conference was called into existence had about exhausted itself in being misunderstood and misapplied. Better stop all further sessions after the Omaha meet.

Here is a curious lawsuit. A Vienna specialist received \$35 for ridding a man of a tapeworm. Afterward the patient thought he had paid too much, and demanded \$20 back. The doctor demurred and was sued. He could not, he argued, put the tapeworm back where he took it from, and if he could he was not sure that either the patient or the law would let him. Besides the tapeworm was dead. The patient complained that it was only a short one. The doctor said he could not find any precedent for removing tapeworms at so much per yard. Finally the doctor gave the patient back \$2.50!

Although modern specialists have emanated from the old school, it does not follow that they should carry with them the condition that their mode of prescribing medicines must be implicitly imitated. Indeed, I do not think that I stand alone in the conviction that when homeopathic practice shall have become more general, that is, *when the immense wealth contained in its materia medica shall have been better understood and appreciated, many of the present specialties, into which the old school is being dismembered, many of the present specialties will be again united into one of much wider scope.*—Conrad Wesselhoef.

Some time ago we received a long letter from a man in a far-off part of Missouri, asking us to keep a sharp lookout for his wife and team, as the wife would probably call at our pharmacy to buy a book on midwifery, and commence practice. She had run off, taking the team with her, and he was anxious to get his team back, even if the wife went on. He described her minutely, even to the red head, and informed us she had skipped off with a "green Dutchman" six feet tall. She never called that we are aware of, and, no doubt, is still on the go. If any of our readers come across a red-headed, heavy-set, middle-aged, fast-talking woman, with a midwifery book under her arm and, possibly, a green Dutchman to her apron string, driving a good team, please stop her and write to us. Her husband wants the team.—*Munson's Homeopathic Phar. Bulletin.*

It is reported Drs. W. J. Hawkes and J. A. Tomlughan have resigned from Hering and taken place in Hahnemann of Chicago, which provokes the query: What is going to become of Hering?

The Omaha meetings of the American Institute of Homeopathy will be held in the new Creighton Medical College, a magnificent structure which gives plenty of room for exhibits, sectional meetings, etc.

The Alumni Association of the Homeopathic Medical College of Missouri (St. Louis) held its annual session at the residence of Dr. and Mrs. W. John Harris, 3514 Lucas Avenue, St. Louis, on Friday, April 1.

The American monthly *Review of Reviews* keeps up its excellent record as a busy man's newsiest and most impartial magazine. The April number will touch with a master hand the Cuban question, the \$50,000,000 appropriation, and other current and very warm subjects. It also has somewhat to say of Germany, as well as of the discovery of gold in Mexico.

More trouble reported in the Chicago Homeopathic College—Pratt, Adams, *et al.*, etc. Can it be that some one is "mendaciously" stirring up this aforesaid peaceful and progressive faculty, as was done several times at Ann Arbor? One man constitutionally so inclined can set the most harmonious congregation by the ears in very short meter.

Lippincott has a new story by Amélie Rives entitled "Meriel." This author, made famous by her "The Quick or the Dead," has not latterly appeared a great deal in serial publications, possibly because of her following of art, and possibly also because of domestic infelicity. This present book is in no sense inferior to her former works, and will repay careful reading.

The entertainment feature of the Omaha meeting, says Chairman Dr. Frederick F. Teal, has not been neglected. The local Committee of the Meissen is actively at work and time will not have heavily upon the hands of the visitors. The Institute members must not expect a Newport clambake, a ride on the Potomac, or a trip to Niagara Falls, but all will be sure of a genuine Western welcome.

Cadet Uniforms.—This is a new feature elaborated by the local committee of arrangements at Omaha, in order that the Institute visitor may have no trouble in finding his hotel or boarding house. The assistants of the reception committee will be clad in cadet uniforms, wearing Institute badges, and will be at all the railway stations. They will have a list of hotels, etc., and will direct those who so desire to them. A very happy thought.

When chronic intestinal obstruction is caused by carcinoma, wherever located, there is practically always an intermittent pain, of a paroxysmal nature, situated in the region of the umbilicus.

In infants, according to Eustace Smith, pain in the head is indicated by wrinkling of the brow; pain in the chest, by sharpness of the nostrils; abdominal pain, by a drawing of the upper lip.

Our good friend and brother Dr. H. G. Glover of Jackson, Mich., has invented a bicycle saddle which he calls "Perfection." If all the other saddles he has sold ride as well and give as universal satisfaction as the one he sent to us, then we agree with him in his choice of name.

Reduced Mortality from Pulmonary Tuberculosis.—The City Board of Health of New York report that the deaths from consumption are now 30 per cent. less than twelve years ago, which they attribute in part at least to compulsory notification and other special efforts at prevention.

The Microbe Pathology.—It is a sad time, says the Phila. *Ledger*, for medical art and for the sick when physicians turn from the study of individual patients to the investigation of disease as an abstract condition, forgetting that every disease is profoundly modified in its type and issue by the peculiarities of the persons in whom it occurs. Of the many evils begotten of this error, a very serious one is that it tends to impair a physician's sense of responsibility, and, therefore, lessen that anxious vigilance which he should never suspend while the issues of life and death are in his hands. At the same time, the patients of a physician who appears to have little faith in his own powers soon tend to lose their faith in him. It is through faith alone that innumerable cures are wrought, cures that have even been called miraculous.

Touching insanity, Dr. Orpheus Everts of the Cincinnati Sanitarium, in his annual report as superintendent, says: "They [these facts] are in perfect keeping with the order of nature, all of the processions of which move in circles, with but slight modifications, instead of straight lines of extension; evolution forever ending in dissolution or return to starting points, whereby a certain equilibrium of energy and uniformity of motion is maintained, and the universe, as it is made possible, secure from eccentricity or disorder. Insanity is a natural procession sequential to certain conditions of human evolution, and so closely related to all other processions of humanity as to be inseparable therefrom, and in harmony therewith; hence not amenable to

separate arrest or interruption of its movement, alike indifferent to the efforts of philanthropy or science to that end."

Sir? It reads very much like some of those fearful psychical platitudes sometimes set at large in the *Medical Times* by the recondite Dr. Carmichael. *N'est ce pas?*

Nearly 500 gallstones, ranging in size from a grape seed to a small marble, were recently taken from the liver of Mrs. McCaffrey, at St. Agnes' Hospital, Philadelphia, while being operated upon for appendicitis. The vermiform appendage was found perfectly normal, and the liver on examination disclosed a dark blue spot from which, when cut, the stones gushed forth.

In the course of a speech in support of his "fox scalp" bill in the Kentucky Legislature, Representative Hatfield of Pike county said: "I ask for the passage of this bill in the interests of religion and morals. If you pay no bounty for fox scalps, no one will kill the foxes; if no one will kill them, they will kill the chickens; and whar you have no chickens you have no preachers, and whar you have no preachers you have no religion and no morals."

Deaths and Ailments from Curious Causes.—In combing the hair of a corpse an Indian woman absorbed poison from the scalp abscess through a scratch on her hand, and died of blood poisoning.

A metal collar button chafed the neck of a Philadelphia policeman, a carbuncle formed, and death ensued.

Ice from a stagnant pond caused an outbreak of typhoid at Kentucky Insane Asylum.

An autopsy made by Dr. Little of New York upon the body of a tea drunkard showed that the heart had a clean break in it.

Five Richmond (Va.) boys filled a cast-off sock with water, and sprinkled each other's faces. All were poisoned and one lost an eye.

The recent death of a boy from eating buttercups has called forth a list of other poisonous flowers, among them the celandine, wood anemone, daffodils, narcissus, lily, snowdrop, jonquil, wild hyacinth, monk's hood, foxglove, night shade, briony, mezerone, and henbane.

The hearing of a chaplain of an Ohio orphan asylum was so affected by a premature explosion of fireworks that almost total deafness has resulted.—*Pac. Med. Jour.*

WIT AND WISDOM (a new department) see page X.

The American Homeopathist.

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NEW YORK, MAY 2, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



C. S. ESTEP, M. D.,
Lexington, Ill.,

Graduate of Pulte Medical College of Cincinnati, O., 1891.

IF it had not been for Hahnemann's violent upsetting of old-school traditions—said a young homeopath recently—the old school would not be so bitter against us even to this day. It was he who created the sectarianism. Yea, verily!

* *

SINCE we must go to war with Spain, think how nice our bachelor friend George B. will look in his artillery regimentals, posed like General Lincoln, of Revolutionary fame, near the mouth of a small cannon.

IF you have not contributed your birthday offering to the Hahnemann Monument Fund this year, do it at once! No nobler form of perpetuating ourselves as a profession has ever been devised.

* *

THE (Denver) *Critique* maligns us in its recent issue by implying that we are of a war-like nature. Our editorial policy, as all our readers well know, is based on peace, always peace, even if we have to fight for it.

* *

BLESSED is the editor who can write courageously, intelligently, up-to-timely, and yet offend no one of his readers. And who can at frequent lapses in the moon's phases fill a page with nauseous letters addressed to himself on the exceeding super-excellence of his journal.

* *

IS it ethically wrong for a homeopathic physician in affiliation with the American Institute of Homeopathy, and a reputed "horse-killer," to make annual contracts with his families, sick or well? Is it wrong for the same thing to be done by a female physician? If so, why not?

* *

WILL the Intercollegiate Committee say—so there may be no slip-up hereafter—how many members of a college faculty *must* belong to the Institute in order to entitle it to a standing in that committee?

* *

ALSO, by what authority that Surgical Committee defined the meaning of the word homeopathy for the use of Dunham College.

* *

AND, finally, what fads may be incorporated in the teaching of a homeopathic college in order not to put it outside the pale of the Intercollegiate Committee.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Rhus Tox. Indications.—Dr. Goullon reports with interesting comments the case of Miss L., who had been nursing a patient for weeks and was attacked by a catarrh of the intestines and stomach; we shall not here decide whether this was caused by a cold or by a mistake in diet; at the same time her whole nervous system was severely affected.

Having been before inclined to constipation, now at every slight provocation she would have diarrhea, e. g., when she intended to take a little trip. She herself gives the following account of her state: "Severe distention of the abdomen (her dress had to be let out almost a hand-breadth). Dyspnœa, especially in the morning and at the slightest exertion. In company she experienced fearful anxiety and restlessness, so that she could not retain her seat. Diarrhea, or at least very soft stools; after the stools a feeling of great weakness in the back or in the small of the back, so that she had to walk stooping forward, and out of breath, and had to rest for a long time. Also, in walking in the open air there was great weakness of the back, so that she could only walk slowly for half an hour, stooping forward. In the morning a slimy taste in the mouth. The appetite was otherwise good." Calcareo carb. given in the morning, at noon, and at night produced improvement, but after one or two days there were frequent slight relapses. Finally, only rhus tox. 6, three times a day, removed all the symptoms.

The patient decidedly gave the preference to rhus, as having been of the greater service; also the great nervousness, the soft stools in the morning, and the weakness of the back are rhus symptoms. More rarely is there found in it the attendant dyspnœa; this is more frequently found as an anæmic or calcarea symptom. The same may be said of the slimy taste, or the attendant symptoms of catarrh of the stomach, to which was added also a long-continued bitter taste.

Internal Medication for Ivy Poisoning.

—Dr. F. Mortimer Lawrence comments on the discovery of a recent writer that a case of ivy poisoning would have fared better had no external measures been employed. He says:

"The writer, long having been a sufferer from this form of dermatitis, has tried everything in the category, from the mildest domestic lotions to strong solutions of nitrate of silver, and has learned from many annoying results to discard altogether the use of external agents and to rely wholly upon the most clearly indicated single homeopathic drug. In recent years the best results have been obtained from belladonna, cantharis, rhus venenata, and apis; but the essential thought, no matter what the selected agent, is to give but one remedy at a time and trust wholly to allaying inflammation by the action of the remedy administered internally. Belladonna acts promptly in suitable cases, quickly allaying intense inflammation. Cantharis and rhus venenata have been found most beneficial for the intolerable itching, while cases characterized by œdematous swelling, without great pain or itching, but with soreness or burning, are helped by apis. Mercurius sublim., sepia, and a few other remedies are occasionally indicated also. Large personal and professional experience has led to discarding all external applications, except pure olive oil to protect the skin from air and moisture."

Antimonium Crud. 3x IN BRONCHO PNEUMONIA.—Dr. Leonard.—Child, æt. eighteen months, was brought to my office to see if I could not fix its rupture, that had been keeping it sick for nearly two weeks. On examining a slight umbilical protrusion I discovered that the temperature in the axilla was $103\frac{1}{2}^{\circ}$, and that it was suffering from broncho-pneumonia. Sounds could be heard all over the chest. Child was hardly able to sit up, and too sick to show its mentality. The first prescription was ineffective, and the next day the lungs were unchanged. Temperature one-half a degree lower. Very cross and irascible, and would not sleep unless rocked. Gave chamomilla 6x, but on succeeding afternoon found patient about the same, but had slept quietly all night. Fever had returned about noon. Temperature at 4 p. m. was $102\frac{1}{2}^{\circ}$. We had to take it by main force and

agility. While studying cham., cina., ant. crud., ant. tart., bry., and nux., a neighbor remarked, "Why, that baby won't let me even look at it; when I look up it jerks its head the other way." That settled it; I then gave ant. cr. Clinical symptoms: child cannot bear to be looked at; extreme irritability and fretfulness. Remarks: a powder every two hours when awake. Improvement immediate and convalescent two days later.

Pulsatilla IN PUERPERAL MANIA.—Dr. W. M. Follet treated Mrs. L., aged twenty-seven, blue eyes, brown hair, stout but flabby. Family history of insanity. First pregnancy passed through the gestative state without having a symptom. Delivered March 25, 1897. Labor normal and recovery prompt. April 18, 1897, patient's husband called at my office, and stated that his wife acted "queer" and had sleepless nights. On calling at the patient's home she at first refused to see me, but my excuse being to see the baby readily granted my request. Patient not inclined to be communicative. Whole personal appearance had changed; formerly very particular as to personal appearance, now just the opposite; sad, staring look; sat continually looking out of her window. This was all that could be learned at this visit. The following two days sufficed to develop the real picture of the disease. Full of anxiety as to the future of herself and baby. Continually moaning: "Poor baby! Poor baby! What will become of him!" Does not want to see anyone. Weeps over her condition; "going to be a burden to her family." Wants to kill herself and baby. Sleepless at night—all symptoms < at night.

Lochia slightly tinged with blood.

Puls. was the first remedy prescribed, but on reviewing the symptoms carefully, the merest tyro could not doubt the remedy: one dose of the 200th cured in ten days.

Euphrasia IN VOMITING FROM HAWKING MUCUS.—A. B. Eadie.—A few years ago I was applied to by a patient who suffered from vomiting his breakfast, caused by attempting to clear his throat of an offensive catarrhal mucus. I made a number of prescriptions that did little but palliate, and finally for some intercurrent malady gave him euphrasia 2c. He returned

after a few days to say "that the medicine cured him of vomiting his breakfast." This fall I had a patient who complained that every morning on his way to work he vomited his breakfast on clearing his throat of an offensive phlegm. He suffered all last winter from the same trouble, and now it had come on again. Euphrasia 2c. removed the trouble at once, and he has been free for about a month.

Phosphorus IN SEPTIC PERITONITIS.—Dr. Howard Crutcher narrates graphically the case of a girl of sixteen attacked by perforating appendicitis. Her friends refused operation until the case was desperate, and then demanded it when the surgeon's judgment foresaw a fatal termination. Yielding to the clamors, the operation was performed, in the course of which a large abscess behind the colon freely contaminated the general peritoneal cavity. Prolonged flushing and drainage completed the operation.

The doctor continues: "Up to the fourth night the progress of the case was far more favorable than I had dared to hope it would be. About the beginning of the fifth day the crash came with a vengeance. The pulse was 130, the mind was wandering, the urine and fæces passed without restraint, and it was very evident that the girl was rapidly sinking. Arsenic was given repeatedly, but without avail. I sent a message to the students who were nursing the case, to the effect that death was inevitable, but that a hot saline enema might prolong life.

"On attempting to give the enema the rectum was found to be open, and no resistance whatever was offered by the sphincter ani. Grayish-white fecal discharges, watery and offensive, passed constantly. The students recognized the indications for phosphorus, gave a dose of that remedy, and, instead of dying, the girl got well."

Dr. Crutcher concludes with earnest references to the conclusive evidence of the amazing value of rational therapeutics in desperate surgical cases.

Says an esteemed correspondent: When Jesus miraculously healed his patients he told them to go and tell no man; but nowadays so-called divine cures are advertised all over the land, double column, top of page, next to reading matter, with a picture of the big-mouthed pastor and his testimonial thrown in.

FUCUS VESICULOSIS IN GOITER.

By R. N. FOSTER, M. D., Chicago, Ill.

IT is now more than twenty years since I began the use of fucus vesiculosus for the cure of goiter. Since that period I have treated more than twenty-five cases. As a matter of fact, I have kept no record since my seventeenth case, but, as no single year has passed without additional experience, the claim that twenty-five cases have been treated and cured by me within the time specified is rather below the mark. Long ago I called the attention of the profession to the wonderful efficacy of this drug in cases of goiter, and I have never ceased to be surprised that it has attracted so little attention. That it has not been tried very frequently I infer from the fact that I have never, but once, seen it referred to in any of our journals, and from the fact also that new methods of cure—surgical, medical, anti-toxinal, and so forth—are being continually brought forward. Yet none of the methods proposed have been able to recommend themselves by such a clinical record as I claim for fucus vesiculosus. I have now simply to reaffirm that I have never known the drug to fail in curing permanently a case of goiter in a person under thirty years of age. The results of treatment are in all cases absolutely uniform—a safe and permanent and thorough cure.

The use of the drug seems not to affect unfavorably any organ or function of the body. It is never necessary to suspend it for a while because of some injurious effects produced. It is not necessary to antidote it by any other drug because it disturbs some function. The goiter will disappear wholly under the treatment, and will not recur. In short, it is in all of its action and effects an ideal remedy, and works an ideal cure. It has been known as useful in goiter for at least fifty (probably a hundred) years. And yet it is rarely used—is almost forgotten. It would seem that in the rush to learn some new things, the profession may actually forget better things. Nevertheless, since the editor of the AMERICAN HOMEOPATHIST requests it, I will put the drug on record once more.

First, I discovered it years ago in the Eclectic Dispensatory, where it may always be found. I tried it in a case of goiter in a young lady, a case which had resisted all previous efforts to cure it,

and the goiter promptly disappeared. It was my first cure of a case of goiter. The remedy did its work so perfectly that, like the tramp who washed once with Pears' Soap, I have never since used any other.

Fucus vesiculosus is a seaweed. It is used to make lean pigs fat, and fat people lean. It is not much of a poison, therefore; but too much may be taken.

It varies exceedingly in quality, and ought, therefore, to be purchased only from the best pharmacists. And if a first prescription fails, we may not hesitate to suspect the drug. A cheap product will not do.

The form used in my own practice was the third extract. The dose given was from one to three teaspoonfuls daily—in three doses, on an empty stomach. The dose is to be given in water, as much as the patient wishes; usually in about two ounces of water. This is because of the peculiar taste of the drug, which is very disagreeable to most persons.

Improvement is evident in a few days or in a month. It is more prompt and rapid the younger the patient. The dose also is larger or smaller according to the age of the patient: one teaspoonful daily for a patient under ten years of age; two for a patient under twenty; three for those over twenty. The older the patient the more difficult the cure. In six months we may hope for a cure in those under ten years; and we may have to persevere for one or even two years in the older patients. But meanwhile we have the satisfaction of seeing the goiter growing steadily smaller—from month to month. The drug seems incapable of any great influence in older persons—say in those over thirty.

The larger the goiter the longer is the time required. Orange juice is a good vehicle in which to take the drug; or a taste of orange after swallowing it soon removes the unpleasant tang.

This is the sum of my experience with fucus vesiculosus in goiter.

I regard it as the equal in goiter of potassium iodide in tertiary syphilis. Indeed, it is superior; for the potash sometimes fails—the fucus never does in patients under thirty years of age.

We may add that it is not necessary to continue the full doses of the drug when the cure is

well advanced. One-half the quantity, one-third, and so on diminishing, will sometimes be found sufficient to perfect the work.

553 Jackson Boulevard.

HIGH-POTENCY CURES IN ENGLAND.

By ALFRED HEATH, M. D.

THE low-potency homeopaths are always advising the allopaths to put the small dose to the test. The allopath does not believe that No. 3 is of any use whatever. The high-potency men are constantly recommending the low men to try the high potencies. The low man is like the allopath—he won't try the high potencies because he can't believe in them. Why will not these people try? It's very simple, but it takes time to convince them. I did not believe in high potencies once; but now I should be sorry to use a low one. Let those who doubt *make* a high potency and then experiment on themselves; they will be astonished, and still more astonished at the way they can cure. If they take the high potency first and record their symptoms, they will get plenty; and then take the low potency of the same medicine, the symptoms will be *similar*, but fewer and not lasting so long, they will be convinced. You may remember that about ten years ago the question of the value of the 30th potencies came before the Milwaukee Academy of Medicine. In the *Organon*, then published by Dr. T. Skinner, July, 1879, I recorded a challenge, that I would tell the name of any already *proven*, well-known medicine in the 30th potency, or give some of its prominent symptoms, numbers only to be put on the bottles. From then to now no notice has been taken of my challenge.

Warts and Calcarea Carb.—Respecting the well-known action of calc. c. in curing warts on the hands, I have had some experience. I think it must be thirty years ago that I had a moderately large wart, a little larger than a pea, on the index finger of my left hand between the first and second joint. I was told to burn it with nitric acid fort. I did constantly, but still it came again; then the same person advised that I should stick pins all round the base of the wart, and make each pin red hot in a flame, so as to produce a blister underneath. This effectually

removed the wart; in a few days it fell off, leaving a new skin, but, unfortunately, it immediately began to grow again. I repeated the process when it had become large, with the same result; and every time it was larger and longer, until it took up quite half the space between the two joints forming a ridge. Then I took the matter up seriously myself. I decided to take calc. carb. 30. In less than two weeks the whole thing was gone. I have never had a wart since.

Another Case.—Some years after this a man came to me with warts on the back of his right hand. I counted eighty (80) of the largest warts (except my own) that I had ever seen; the number of small ones it was *impossible* to count—the back of the hand and fingers was completely covered. I gave him calc. c., also 30th. In a week all the large warts had turned black and shrunk, showing a red rim around each at the base; within a fortnight they had all *fallen off*. His hand was perfectly free from any trace of warts.

Fistula in a Pony Cured by a 30th Potency.—Some two years ago a young titled lady patient of mine came to ask me if I could cure a valuable pony of hers. The pony had had "strangles," and, as a sequela, a complete fistula had formed in its jaw. It was a very valuable prize pony. The local vet. could do nothing, so Sir I——, a distinguished vet., was called down from London to see the pony. He pronounced it a complete fistula and said he must operate, but was afraid it was very risky, and that he might kill the pony. This opinion caused the lady to consult me. I gave malandrinum 30, which I had recently made myself directly from a very advanced case of "grease"; in ten days the fistula had healed, and remains well to this moment, and the pony has since the cure won several prizes at shows. With this remedy in high potencies, either 30th or 200th, I have cured several cases of fistula in human beings. Generally the fistula heals up in a week or ten days, although there is no proving of malandrinum, and I have only been guided to it by analogy, or what I will call disease relationship. I believe that consumption and chest diseases are caused largely by the superinduced psoric conditions produced by vaccination. Vaccine, as all know, is the "grease" (maland.) of the horse passed through the cow, not improved

by this second hostess. The intimate relationship between fistula and chest disease is well known. Operate for fistula, and people die of chest disease, although no chest disease exists at the time of operation. I believe that consumption is produced *often* by vaccination. What more likely, when we consider the enormous number of calves operated on, than that consumption in *cows* is often induced by calves being inoculated with "grease" (Jenner's plan of vaccination), or with vaccine, which is only modified "grease," to keep up the supply of vaccine for human use. There can be no question but that nosodes of this class, obtained from psoric states, are or ought to be some of our best remedies and should be well "proven."

I shall be delighted to give any physician some of my "nosodes," all prepared by myself, if they will prove them. I shall only ask them to take the 30th potency. Dr. Burnett, I believe, began some experiments with *my remedy* tuberculin 30th, or, as he is pleased to call it, bacillinum. I prepare all my "nosodes" by a special plan which at present I wish to keep to myself. *No one* knows how I make them. The plan of making, I think, is only second in importance to obtaining the right material for the preparation, if you want results; and my tuberculinum acts, if I may judge from the reports constantly published.

114 Elmy Street, Eaton Square, S. W.,
LONDON, Mar. 25, 1888.

SOME CASES FROM INDIA.

By SURENDRA-SAD RAY, M. D., Bidwell, Bengalee.

CASE I.—X., æt. 30; multipara; fourth child; delivery easy. Seven days after, she bathed as usual here. This brought on fever and pain in the right ovary. Was seen by her old-school medical attendant, who gave her *arn.* 6 and *rus* 6.

I saw her in consultation three days after, in the evening. She had had very foul-smelling lochia. The right ovary was enlarged to the size of a ball and was very painful, so much so that she could not bear even the constant pressure of the clothes. Complained also of a dull ache there. Gave her *lach.* 6 every four hours.

Next morning; was much better in every respect; continued *lach.* 6 every four hours.

The day after: *lach.* 30 thrice daily.

Cured two days after.

Her chief guiding symptoms were the extreme fetor of the lochia, the dull ache, and the extreme sensitiveness of the part.

CASE II. —, æt. forty. Widow. Bathed in a pond one cold morning; had lockjaw two days after with gradually developed tetanus.

January 4, '97. Saw her on the ninth day of her illness. The whole spine was spasmodically bent back. The spasm was tonic, with partial cessations. Could swallow liquids only, and that with the danger of being suffocated. The least touch, sound, or light aggravated everything. Perspiration free. Pulse feverish. Temperature 100° F. Gave her *nux v.* 3x every hour until improvement, and then every two or three hours.

January 6. Stiffness and spasms much the same. Irritability much aggravated. Pulse hard and rapid. Temperature 101° F. *Acon.* 1x every hour, and then every three or four hours.

January 8. Stiffness and spasm much less. Pulse not so hard. Temperature 99° F. No sweat. *Acon.* 6 every four hours.

January 10. Slight stiffness. Bowels much confined. Hard ball felt over left flank. *Opium* 6 every four hours.

January 11. No stools. *Plumb.* 6 every four hours.

January 12. No stools. Soap-water and castor-oil enema. Passed a quantity of very hard scæculæ. *Phyto.* 6, t. d.

January 16. Cured.

I gave her *nux* because of the extreme nervous irritability. The character of the pulse, fever, and the cold bath pointed to *acon.*; the intestinal inactivity after the general muscular spasm indicated *opium* and *plumbum*, but could not be got rid of.

Phyto. cured her of the remaining spasm and stiffness.

La petite Tomo Inoyne, the Japanese graduate this year from the Cleveland Homeopathic College, arrayed herself in her native costume for the class banquet and for the graduation exercises, and looked very pretty and sweet. She was a great favorite with the class, as she was also with the faculty.

Pil. No. 30.**The Hahnemannian Advocate:**

The operation of Schlatter, the successful removal from the living human subject of the entire stomach, is one of the most extraordinary feats of operative surgery in the history of the world. It is possibly the foremost of all surgical providences, when all the circumstances are considered. But the performance is not destined to travel much beyond the leaves of the record of the curiosities of medical practice. As a life-saving measure it will have no practical value. It has been performed twice within a short time in America, at St. Louis and again in Milwaukee, both cases ending fatally; it will doubtless be attempted many times hereafter, but it is almost too much to hope that it will add a hundred years to human life within the next century. It is applicable, in the abstract, only in malignant disease of old people, and its performance requires such prolonged and dangerous manipulation that a death-rate approaching a hundred per cent. may be depended upon.—*Howard Crutcher.*

The Hahnemannian Monthly:

These things ought not to be so. Homeopathy is not a dead issue, nor yet an expired trade-mark, and its adherents are not all either knaves, trading on a name, or fools, following an antiquated delusion. Let our hospitals and dispensaries be utilized, not to test every new, untried allopathic preparation, but to prove that there is in homeopathy a distinct advance in the science of therapeutics over the empirical practice of the old school. Were half the time now spent in discovering minute points of differential diagnosis to be verified by a *post-mortem*, or in seeking to keep track of the ever-varying suggestions of a lawless empiricism, spent in studying up the cases to find the curative remedy homeopathically indicated, suffering humanity would be better served, and homeopathy more highly honored.—*Editorial*

The Medical Advance:

Facial semeiology, taken together with physiognomy, forms one of the most important aids to the diagnostician, and will oftentimes unravel an apparently obscure case before a

question is asked. Its range is great: It tells the age of the patient, which is often a very important factor; it tells the disposition, which is often still more important; it will reveal the lovable, easily pleased individual, or the fault-finding, suspicious, crabbed, morose hypochondriac, who will make life miserable for the unfortunate physician who happens to be employed; it will separate the intelligent from the illiterate or the lunatic; it will differentiate between the honest, loyal, upright individual, who will be true to his doctor, and the practiced cheat, who will defraud the good physician of his well-earned fee; it will show the glow of health, the promise of speedy convalescence, or the rapidly approaching presence of that grim monster, Death, before whom all must bow. And when you ask how this is done, we say, "Through facial semeiology."—*H. P. Holmes.*

[Dr. Holmes has given an interesting study, and one which it would be of profit to medical men generally to ponder upon. It has been somewhat the hobby of this editor, and he, therefore, the more appreciates the concise manner in which Dr. Holmes has arranged his data. Our (personal) materia-medica work at Newport and at Detroit, as the members will remember, was along this line. We went, however, a little farther than mere diagnosis, in that we attempted to show the remedy as well as the diagnosis, by the shape as well as the color of the head and body. It is truly an interesting study.—*Ed.*]

The Homeopathic Physician:

The editor, when only a student of medicine, had a case of occlusion of the lachrymal duct occurring in his own mother. There was fistula, and the tears flowing down the duct and out through the fistula swelled up the tissues in the inner corner of the left eye considerably. This continued for several years, until finally pus was secreted which swelled up the tumor in the left inner canthus until it was the size of a walnut; then ulceration of the external skin at the highest point occurred, a fistula was formed, the pus discharged externally, and the tumor collapsed and remained so for several hours, when it would begin to rise again. Eminent physicians tried to cure it, and failed. Surgeons

proposed operation, which was refused, and finally the writer of this article studied the case, thought that silica was indicated, gave it in the two-hundredth potency, and the tumor discharged and collapsed, and never rose again for twenty years. This certainly is a remarkable result to attain in a case that seemed to be suitable only for surgical interference. It is an encouragement to any student to persevere in the good cause.—*Editorial.*

The Pacific Coast Journal of Homeopathy :

Dr. C. S. Mack of La Porte, Indiana, has within the last few months proved a very generous contributor to homeopathic journals: in fact, not any of the journals appear to have been slighted. The articles contributed are all brief and to the point, and the point in them all seems to be "My little book, Principles of Medicine."

CASTRATION FOR RAPE IN KANSAS.—A bill has been introduced into the Kansas Legislature, referred to the Committee on Public Health and Hygiene, and by them reported back with the recommendation that it pass. It provides that every person who shall be convicted of rape, and every person who shall be convicted of incest, and every minister, clergyman, priest, or teacher having charge of any church or other religious body or school, who shall have illicit connection with any unmarried virgin female under twenty-one years of age of his charge or school, and every guardian of any female ward under the age of eighteen years who shall defile her shall be punished by imprisonment at hard labor for a period not less than five nor more than twenty years, and in addition to such punishment shall be castrated.—*Southern Medical Record.*

[This reminds us of that bailiff who, having been sent after a witness, returned to the court and said he had twelve reasons for not producing him. The first was, The witness is dead. The second—but here the court interrupted, and said the first reason was sufficient.

After providing "that every person who shall be convicted of rape, and every person who shall be convicted of incest," where is the need of specifying further as to ministers, clergymen, priests, or teachers?

And why not doctors and bookkeepers and whitewashers and congressmen?

Why draw the line at twenty-one or eighteen? Is not this crime as heinous after eighteen and twenty-one as under?

And after a man is dead, where is the use of chopping off his head?—ED.]

The American Medical Monthly :

The point which seems to be invisible to some of our writers against common-sense materia medica—symptomatology—is, that the men who are teaching and working to purify the existing collection of alleged drug pathogenetic records are simply trying to find the reliable symptoms and drug effects generally—those effects which are without doubt due to the drug to which they are accredited. That is all; and the men who are persistently declaiming against this attempt are simply making spectacles of themselves, and in the future will regret the asinine part they have played.

There is scarcely a number of the AMERICAN HOMEOPATHIST issued in which the editor does not refer in disparagement to the work of Dr. Richard Hughes, the Materia Medica Conferences of the American Institute, or the work of the Baltimore Investigation Club—usually to them all at the same time. So far as we are concerned, the editor has our full consent to amuse himself in this harmless way just as much as he wishes. As we have before said, he does not in the slightest understand the points he attempts either to criticise or to ridicule, and we certainly have no fear of his successfully refuting any fact of science.

[Sir? So the several critics of the pathogenetic materia medica, as interpreted by the Baltimore Club, are "spectacles"? Still it is to be remarked that the "spectacles" have succeeded in reducing the sessions of the Materia Medica Conference of the American Institute from three to one—and that solitary one session to be held the morning of the day the Institute proper opens. And, further, it is not at all unlikely that at Omaha the Conferences may conclude to be discharged. If the *Cyclopedia of Drug Pathogenesy*, and its American high priests—the Baltimore Club—had any improvement that really improved the Hahnemann materia medica, then all the ridicule which could be heaped upon it by the "spectacles," whether

"asinine" or otherwise, would not injure it one particle. But the publication by the club of one such pathogenetic proving as that of *china*—the great forerunner of all homeopathic provings—is enough to destroy all confidence in the club's work.

The AMERICAN HOMEOPATHIST has no quarrel with Dr. Richard Hughes, as a gentleman, as a scholar, as a physician, and as an author. But by some of the queer mutations of time and policies, he now personifies the principle embodied in the *Cyclopedia of Drug Pathogenesis*; and it is the *Cyclopedia* we are after—as the boy said who wanted to get "even" with the preacher. Dr. Hughes is not beholden for his defense to Brer. Price: he is abundantly able to take care of himself; and when he comes to Omaha—as we all hope he may—he will promptly and vigorously present his side of the case to the undoubted dismay and utter rout of the "asinine spectacles." When Dr. Hughes attacks Hahnemann and the high potencies, as he did during the Homeopathic Congress at Bristol last year, and in the words ascribed to him by his personal and professional friends in the (London) *Homeopathic Review*, then neither Dr. Hughes nor Editor Price has any cause for grievance or for calling us "spectacles" if we stand up for Hahnemann and for Homeopathy. Sir?—ED.]

DIPLOMAED QUACKS.

[N a well-written editorial on A New Medical Examination Law for Illinois in the March *Medical Visitor*, Editor Smith uses the following language:

"These charlatans [the advertising doctors] flourish like the green bay tree and will until a law is enacted which makes the practice of the healing art a felony without a license from some reputable college. When this is done there is naught to prevent the checking of the ghouls."

Ah, Brer Smith, there all the trouble lies! If it were only the uncertificated, unlicensed, undiplomaed scamps who advertised cures and monthly treatment and made contracts by the month or year, at so much for family, sick or well, or became lodge physicians or railway surgeons or opened free dispensaries, then the

question of medical legislation would be an exceedingly easy one. But it isn't!

Only a few years ago, that wonderful Chinese doctor who suddenly and simultaneously appeared in a dozen of the large cities, and performed such wonderful cures, was traced to a Detroit company of scallawags whose *modus operandi* was so simple that it was marvelous how its *exposé* had so long escaped the intelligent American. It consisted in hiring a large, good-looking Chinaman washerwoman in each of these cities, arranging him in the traditional Oriental costume, seating him on a dais to look unutterably wise and profound, with an interpreter to ask the intended victim a few questions which he, the said interpreter, repeated to the Chinaman, whereupon the Chinaman called for red paper and marking pot, made a few tea-chest symbols, gave the "label" to the interpreter, who disappeared into an adjoining room and presently returned with a half-dozen bottles of "truck" with copious directions. The interpreter also received all the money—the Chinaman being presumably so ignorant of everything but medicine that the interpreter had to stand between him and a designing American world. This Chinese doctor performed as many miraculous cures as are now reported every day by lame old women—male and female—in the advertising columns of the daily press. The trick consisted in hiring this Chinaman in each city, paying him ten or fifteen dollars a week for keeping his mouth shut; also hiring a likely young man, the "interpreter," who was a medical graduate and really examined the victims; this graduate received a stated salary from the Detroit company the same as the Chinaman.

In Cleveland, not many moons ago, two young graduates were hired outright by a "homeopathic" medicine company at seventy-five dollars each per month, to examine patients coming to the medicine company's office, or in making the "free" visits with which the advertisements teemed. A chief requisite of the applicant was that he be a graduate of a medical college and registered in the State of Ohio! No one would, therefore, dare accuse this medicine company with quacking, for their resident physicians were regularly graduated and legally registered in the State! Therefore!

And we feel warranted in making the assertion that in ninety-nine out of every one hundred cases of "clapp"-trap advertisements, offensively displayed, the principal worker in the fraud will be able to show a legitimate medical diploma and proper State or county licensure.

This form of rascality has become so bold-faced that the intending companies have sent discreet procurers among expectant graduates, quietly studied their efficiency, personnel, and address; and then, as soon as graduated, "go after them" with a \$75-a-month situation, for a year! Is it to be wondered that the Recent Graduate, who has barely had enough money to pay his diploma fee, who is head-over-heels in debt for everything, who has no prospect before him save a half-dozen years of genteel starvation—is it to be marveled at that he welcomes the bait, and gladly enters into the nefarious business; especially as his name nowhere appears in the advertisements, and is only made known when required to prove to intending patients that he is a duly and truly graduated medical man, and not a quack!

The Nebraska Board of Health has made an effort to reach this by making it a matter obligatory that the applicant for practice-permission in that State shall not only be a graduate, but "come well recommended" by medical people in Nebraska. Yet even here the strictest rules and laws cannot work backwards; for after he is once safely admitted and feels the ground under his feet, he may defy the opinion of his recommenders and engage in arrant quackery.

How will you reach these cases, Brer. *Visitor*?

APIS A TÆNICIDE?

PROFESSOR FOULON, in an interesting lecture on *Meningitis** adds the following: In this connection I wish to tell you, incidentally, about a case of meningitis which I had under treatment some time ago, and in which, on the fourth day, I prescribed apis. On the fifth day the child passed a tapeworm. The boy went on from bad to worse and passed away on the ninth day of the attack and the seventh of treatment. Now, the point I wish to call to your attention is in the nature of a query: Is apis a tænifuge

or tænicide? It is true that tæniæ sometimes pass away from those who are affected with mortal diseases, somewhat as rats are said to abandon a sinking ship, and this may have been the case here; but since then, in two cases in which I had removed, by the usual means, tapeworms which came away without the head, I gave apis afterward and there has been no re-appearance of the worm. Were the heads destroyed by the tænicide first given, or by the apis? I give you this observation in order that you may have a chance to either confirm or disprove it as opportunity offers.

THE SACRED MEDICAL COMMENCEMENTS.

COMMENCEMENT of the Hahnemann Medical College of Chicago.—The faculty and the class of '98 of the Hahnemann Medical College of Chicago held their 38th annual commencement Thursday afternoon, March 24, 1898, at 2 o'clock, at the Grand Opera House. The class numbered twenty-nine, five of them being women.—*The Hahnemannian*.

Good for Hahnemann of Chicago! It takes a good deal of courage to break away from a custom apparently as deeply rooted in the average medical faculty, as the inseparable union of the medical school and the church. In Cleveland we are still bound to a Baptist church for a proper edifice in which to properly knight our medical graduates. We would suggest, in all fairness, if the church influence is to dominate, that we pass them around, and not give any one of them a monopoly of sanctifying the graduates. Let the next commencement be held in the Jewish synagogue; the following one in St. Patrick's cathedral; the next thereafter in the African Methodist Episcopal church, and so on till we make the circuit. There are colored graduates in every class, as there are Hebrews, and Catholics, and Seventh Day Adventists. Homeopaths are noted for that "half-glass of water, please," in which to mix the high potency: but that is no good reason for always calling in the good offices of the Baptist church. N. B. We are not fighting the preachers nor the churches. We are fighting the Middle-Ages medical faculty, which assumes that there is no place so good and so holy for its graduation exercises as a Protestant church, and no

one of its twenty-seven professors so well gifted with brains and common sense as the nearest preacher for delivering a medical-faculty address.

AS TO ALLOPATHIC LIBERALISM.

WE are considerably amused, on taking up the current *Medical Mirror*, to find a good deal of space given to an article entitled "Liberalism in the Medical Profession." The editor seems to believe that the homeopathic school is rapidly, if quietly, being merged in the allopathic; and as a reason for this belief he quotes a number of passages from the New York *Medical Times*, "the leading and best so-called homeopathic journal in America"! The quotations are made from January, 1887, page 308; April, 1886, page 18; June, 1886, page 83.

We would like to suggest to Editor Love that the New York *Medical Times*, while a good and well-edited medical journal, does not even *pretend* to be a homeopathic journal, much less being the best. Also, that the difference in years between 1886 and 1898 is twelve years. Finally, that the best way for learning what is going on in any profession is to consult journals of that profession of the very latest dates. If Editor Love will do this he will be most wonderfully surprised to find homeopathy a very lively corpse, indeed.

Correspondence.

THE SENIORS AGAIN.

AMERICAN HOMEOPATHIST:

Shortly after the Buffalo meeting of the American Institute, when the political excitement had had time in which to measurably subside, the writer took up his pen to discuss some of the long-time abuses, which were never more flagrantly practiced, never more painfully evident than at that meeting. The article was completed but pigeon-holed, because it seemed a bit too caustic, not for the abuses it dealt with, but for the temper, perhaps, of the Institute at the time. The writer has several times felt prompted to haul the article from its resting place and send it along, but he has resisted the temptation until now, when he yields to the conflicting emotions excited by two very different editorials which have recently appeared; the one in the January number of the *Medical Century*, dignified in

character, temperate in tone; the other in the January number of the *Hahnemannian*, which is characteristic of the very evil the present agitation is designed, and destined, too, to correct—arrogant, intolerant of criticism, abusive to those who dare to differ. Such editorials will do more to illumine present evils, and more to consummate their correction, than any other influence which might be set at work.

The writer has not missed a single meeting of the Institute since he joined; he takes nearly every journal published in the homeopathic profession, and he feels that he is in a position to form a pretty fair opinion of Institute affairs, political and otherwise. It seems to him that the Buffalo meeting of the Institute has been productive of sentiments that should, and surely will, redound to the greater usefulness of that grand old body. The abuses which have been so flagrantly practiced in the Institute during recent years have at last excited a revulsion of feeling, among the better-minded members, which will result in making a new Institute out of the old. These abuses are no better illustrated than in the defeat of Dr. Bailey for the presidency. Dr. Bailey and his friends learned at Buffalo, what the writer warned them beforehand they would learn, that merit, ability, and availability alone never will elect a man president of the American Institute; that he must be supported by the "machine"—so long as present methods exist.

We would not allow ourselves to even think for a single moment that the present honored and honorable president of the American Institute was aware of the methods so openly adopted by his friends at the time when his election seemed uncertain. The methods of ward politics were called into play. Saturday night, with only Sunday intervening before election, Dr. Bailey's election was as assured as an election can be before the voting begins. Why, else, should the opposition have made advances to Dr. Bailey's friends, with a proposition they knew they could not and would not fulfill, asking for his withdrawal? They proposed a trade with goods they knew they could not, and never intended to, deliver. The friends of the successful candidate *admitted* after the election that Dr. Bailey had them scared within an inch of their lives Saturday night—*had them beaten*. The consternation written on their faces Sunday morning, the uproar in the hotel lobby, told the tale without any *post-mortem* confessions. What was it that "did the business" for Dr. Bailey? A midnight call upon a certain old New York politician who was quietly sleeping in his *couch*; telegrams sent here, there, and everywhere over New York State; money for railway fares, for initiation fees, for annual dues. What a lot of

new names were posted Monday after voting began ! Who put up the money ? The successful candidate did not, for he *would* not. His friends did for him what he would have blushed to think of doing for himself. The writer calls attention to these matters, not to throw discredit upon the very gratifying vote the successful candidate received, and deserved to receive, but to warn future candidates of any party to look carefully to the men who take their canvass in hand.

Dr. Bailey was, furthermore, betrayed by a lot of traitors and cowards ; traitors who avowed allegiance to him and then gave his strength away to the opposition ; cowards who would have voted for him had they not been *afraid*, clear down into their boots, to do so. Some ostensible friends urged Dr. Bailey to withdraw ; because of their friendship for him they hated to see him run the risk of defeat ; he was too good a man to be sacrificed—and *then they voted against him*. God protect the Institute candidate from his *friends* ; he can protect himself from his enemies.

Dr. Bailey's defeat was to his credit. He was defeated because he and his friends were not willing to purchase victory at the sacrifice of their self-respect. Dr. Bailey's canvass was clean and aboveboard, as the writer is in a position to know. He showed by the manliness with which he accepted the result the kind of a president he would have made, and will make, no doubt.

The "machine" whose connivance is so essential to a candidate's success is the *Senate of Seniors*, shut one's eyes to the fact as much as one will. The seniors have no politics ? Well, it's their *religion*, then. Can anyone remember the time when the seniors did not have their candidate ? How was it at Newport—after they had pushed one of their members for all he was worth until the last moment, when it was seen that he could not win—what did they do but put up another, whose name had scarcely been mentioned, and won by one vote ? At Buffalo, during the progress of the voting, one senior was heard to say, "It will teach them a lesson." And it did. It demonstrated to the whole Institute just where the clutches of the senior were fastened.

The writer's natural predilections, from the standpoint of term of membership and from the standpoint of age, are naturally with the seniors. But he loves the old Institute more. He sees the rock ahead. The Senate of Seniors has become a menace to the future progress and usefulness of the Institute. Whatever purpose the Senate may have served in days gone by, it is at present in direct antagonism to that democratic spirit which must be the very life of the organization. Let the seniors pursue their arbitrary and

autocratic methods only a little while longer—and the old Institute is gone.

There is another feature of this question which is more important than appears on the surface. Of the two hundred and nine seniors only sixteen are west of the Mississippi and only six south of Mason and Dixon's line. There you are again—the secret of the desire of the East to dictate the policy of the Institute. Dr. Bailey was defeated not only because he lacked the high estate of seniorship, but also because he was—oh, just from out West somewhere !

The Institute can maintain its vitality and vigor only by the constant addition of new material—*young men*. Not only must young men be drawn into the Institute, but they must be put actively to work and be made to feel that the organization's success depends upon them. Then, they must not be denied the natural rewards of their labors. The disposition so constantly and so openly shown by older men of the Institute to suppress the younger men is beyond the writer's comprehension. It is safe to assume that any young man who joins the Institute is prompted, to a certain extent at least, by ambition. Without ambition any man becomes a deplorable failure. What young man, drawn into the Institute by his ambition, if you please, is going to throw his whole energy into Institute work when he knows beforehand that smiles of compassion will be his only reward ? Dr. Bailey's running for the presidency was looked upon as a piece of effrontery. The writer overheard one senior say, in commenting on the matter, "Bailey had better go soak his head." And yet this same senior had been elected president of the Institute years before, when he was younger than Bailey at the time—and had not accomplished half as much.

Mr. President, the writer would like to offer the following resolutions :

WHEREAS, There is widespread dissatisfaction throughout this Institute with the Senate of Seniors, and

WHEREAS, The Senate of Seniors, as an organization, cannot serve the Institute in a single particular which cannot be better served by the seniors as individuals ; be it therefore

Resolved, That the Senate of Seniors of this American Institute of Homeopathy, year of our Lord eighteen hundred and ninety-eight, be and is hereby disbanded.

Question ! Question !! Question !!! Mr. President.

Then let this be the first of a series of reforms that are absolutely necessary for the welfare of the Institute. Abolish forever the policy that will appoint a select few to committees and sections, oftentimes to the same committee or section year after year, when there are hundreds

of other men, just as capable, who have never been recognized. Some of the sections at Buffalo read almost like reprints of the same sections of half a dozen years ago, with the exception of a new name here and there, which might be attributed to a mistake of the printer. The writer is well acquainted with dozens of men who have been members for years, without a single time having been asked to serve on committee or section. Some of these men still attend, year after year, while others have dropped out of sight.

Gentlemen of the Institute, this is all wrong, radically wrong. Steps should be taken at once, before it is too late, to correct this evil. It is a serious mistake to leave the selection of section members to the personal predilections of the chairman. Each chairman, anxious to make his section the best, will associate with him the men who are best-known in that special field, and this will result inevitably in the same men serving on the same section year after year. The writer would suggest, as one way to correct these evils, the following amendments to the by-laws, article vi.:

(1) The chairman of one year shall serve the following year on a Committee on Section Membership, whose duty it shall be to assign members to the different sections, allowing each member, so far as practicable, to associate himself with the section of his choice. The president shall indicate which member of the committee shall serve as its chairman.

(2) No member shall serve on the same section two years in succession, except where succeeding from member to secretary, and from secretary to chairman.

(3) The secretary of one year shall succeed to the chairmanship the following year.

(4) The chairman shall select his secretary from among the men who served on the same section the year before.

These amendments would result in two important reforms; first, they would abolish the present monopoly on sections, and very soon develop the whole Institute into a body of active, busy workers; second, they would take the appointment of chairman out of the category of political spoils and give every man a chance. Many men who would take pleasure and pride in serving as secretary or chairman, and who would reflect credit upon any section, are not willing to become political henchmen in order to secure appointment.

A similar plan might be adopted for the distribution of committee appointments. It would prevent, for example, the same man holding the chairmanship of the transportation committee, with transportation thrown in, two years in succession.

In submitting the above recommendations, and in offering the above suggestions, the writer is prompted only by his devotion to the American Institute of Homeopathy, and by his desire to see it the live, active, democratic body it should be. The Institute has run down at the heel badly, and is but a mere shadow of its former self. Every man who attends its meetings knows this. Are we going to let matters go from bad to worse, or are we going to pull ourselves together and *do something*? The writer appreciates the fact that many of the members who seem to monopolize sections and committees are innocent of any intention to "run" things. They are there because they have been appointed, and because they are not the men to shirk duties and responsibilities. They are unselfish, big-hearted men who would be glad enough to shift their responsibilities upon younger men. There are others, however, who would consider it an insult should they be assigned to the ranks for a single year, in order to make room for others. But the time has come for a new deal, gentlemen, *and let us have it right away—at Omaha*. If this "rule or ruin" policy is going to be persisted in by the same old set, ruin will come sure and soon.

RADICAL.

[The writer of the above article is a well-known homeopathic teacher, ex-editor, and practitioner. He has been and is a faithful member and has been on some of the committees of the American Institute; he has seen the injustice practiced in the appointments of the last few years, and the apparent dominance of the seniors in the selection of Institute officials. We do not know that he is absolutely correct in his charges, and do not hold ourselves responsible for his allegations. But, like the correspondent, we have noted the murmuring which has been going on for some time past touching the Institute policies, and which has now broken forth in a half-dozen of our best journals, in a tide of complaint, so that we are fain to believe that where there is so much smoke there must be fire. We bespeak for the article a careful reading. If the Institute has been guilty of the malfeasances herein charged, then it is necessary for the profession to know it in order that prompt correction be applied.—THE EDITOR.]

LIFE INSURANCE EXAMINERS.

WE have among us, and for years have entertained in our midst, without a murmur of disapproval, a set of corporate bodies known as life insurance companies, who in the majority of cases discriminate against homeopathic practitioners in making their appointments of

examining physicians. We are old enough, big enough, and sufficiently learned to command the respect and clientage of the most cultured of every community; and we, as homeopathic physicians working always for the furtherance of homeopathic principles, must in this province exert every effort for the recognition of our school in all places of importance and in all places where respectability and honor will permit of our access.

Up to the present time our applications for medical examinerships have in many cases remained unanswered, perhaps; or else a very polite (?) letter has been addressed to us stating that His Importance—the supreme medical director—finds it impossible to make the appointment owing to our not being of his school. This he does feeling secure in his position to throw a little of his superior sarcasm upon the, to his mind, humble and insignificant practitioner of homeopathy.

So much for the condition. Now what is the indicated (homeopathic) remedy?

Let every homeopathic physician, wheresoever he may reside, take up arms in his own defense, and carry the war into Cuba, as it were.

People employ members of our school because they know of our good works and because of their belief in our abilities. How easy then it is for us, when approached by any of our patients on the subject of life insurance, to mention a company of equal rights to all schools of legitimate medicine, and see personally to it that they are insured in such company. Enlighten them in the matter by explaining the relations of those antiquated medico-perverted companies to the homeopathic profession. When we as one great whole have done all this, those supreme medical directors will be asking: Why are we not getting more new business? what is the cause? When they begin to ask themselves these questions, and when the directors begin to question their agents, what do you think can be their reply?

Well, just at this time the *similia similibus curantur* begins to work.

H. D. HANDY, M. D.

Durango, Col.

AGAIN THE GENERAL PRACTITIONER.

NOW comes Dr. Pemberton Dudley announcing that the programme of exercises to be had in connection with the annual commencement of the Philadelphia Hahnemann Medical College will include also the celebration of the semi-centennial of the college, to begin Wednesday morning, May 11. That which is of especial interest is the series of questions which on this special occasion will be taken in hand and discussed. They are the following:

1. The Use and Abuse of the Didactic Lecture.

2. The Province and Value of the Laboratory in the Medical Course.

3. How Can the Teaching of the Specialties, in the Undergraduate Course, Be Made to Serve Its Best Purpose—the Qualification of the Student for *General Practice*?

4. The Proper Place and Period of Clinical Work in a Four Years' Course.

5. Preparatory Studies and Preparatory Departments in Medical Colleges.

Mark in especial that third topic. Hasn't that got the ring of good metal? We know of several would-be leading colleges where this question would be stated somewhat like this: "How Can the Teaching of Medicine, in the Undergraduate Course, Be Made to Serve Its Best Purpose—the Qualification of the Student for *Specialty Practice*?" And if this enigma had been sprung at a class banquet the medical (Edipus would have covered himself all over with glory, holding up the Specialty-end of the argument, the while dexterously ridiculing the General Practitioner. But, thanks to the leveler heads which still ornament many of the staid members of the homeopathic profession,—and there are many such in old Hahnemann of Philadelphia,—the General Practitioner still stands for the Medical Professional, and the Specialist depends upon him for his bread.

Dr. Dudley takes the matter in hand in his customary masterful fashion; the questions quoted are of the kind usually emanating from his pen. The teaching of any medical college is and should be and always must be in the line of general practice. It is a bad reputation for a college or a man to have that it or he is operation-mad, that they see nothing but operations and more operations. The general practitioner is master of the field; there will always be fevers and colds, and diarrheas and consumption and scrofula to "doctor," but the day may come when there will be no more ovaries and wombs to take out—a reputation which is already fastening itself upon the vicinage of a woman gynecologist of a Middle-Western city. The Specialist who reads this will cry out that the writer hereof is envious and hypercritical: that operations are necessary, and all that. Operations are necessary; but not to the extent to which they are indulged in by the on-coming generation. A student passing from the portals of his *alma mater*, in ninety-nine times out of a hundred, has given much more heed to the dominating specialties which have been drilled and drummed into him than to purely medical diseases, the exposition and treatment of which he has listened to with bare tolerance, as the

antiquated notions of old fogies, or the fads of younger half-baked enthusiasts.

Let us get back a little, once in a while, to our base of supplies. Homeopathy is not being benefited to any noticeable extent by the adoption of all the modern fads—as was so properly pointed out recently in an able editorial in the *Hahnemannian Monthly*. Stand up for the General Practitioner! His lot, as a rule, is hard enough, in all conscience, to entitle him to a respite from the gibes of hermaphroditic medical speakers—in that they are neither General Practitioners nor Specialists. The profession owes a vote of thanks to Pemberton Dudley, and his college, for the proposed innovation outlined in the circular.

PULTE MEDICAL COLLEGE.

THIS progressive college has made a number of good innovations this year. For instance, in its not having an annual class banquet, but instead thereof subscribing \$100 to the Hahnemann Monument Fund. Then the faculty has added another \$100 to the same fund. Then it published its annual commencement programme with a heading in lithograph of three views of the Hahnemann monument. And, lastly, its programme is distinctly medical; and it held its graduation exercises in the Scottish Rite Cathedral, which is NOT a church, thank you! Instead of the stale and withered faculty address delivered by the nearest parson, Dr. J. D. Buck reviewed the college year as dean; Professor C. D. Crank gave an address entitled "Who Was Samuel Hahnemann?" Professor J. M. Crawford followed with another entitled "What Did He Do?" and the genial and ever-popular Walton closed this symposium with "Why Build Him a Monument?" All of these were practical, every-day medical questions, instructive alike to the "boys" and to the audience. There was no perfervid rhetoric from two or more clergymen, depicting the beauties of medical holiness and pharmaceutical sanctity. No cut-and-dried moralities and humanities. Professor Snow delivered the valedictory, which means that the class was given something to take home with them and digest carefully before throwing it aside, as they would most likely have done with a goody-goody sermon, or one in which the class is counseled not to make an idol or an ideal of Hahnemann, forsooth because Hahnemann is dead! and because the present-day homeopath is far advanced over the well-intentioned old gentleman of Coethen. There was lots of good music, and we make no doubt that from start to finish it was an ideal and very successful medical commencement. Our congratulations to Pulte, and its splendid corps of officers and faculty!

OLD HAHNEMANN'S SEMI-CENTENNIAL.

OLD Hahnemann of Philadelphia will, at its next annual graduation exercises, combine therewith its semi-centennial celebration as a college. Among the exercises mapped out for that interesting occasion is a series of questions of lively interest to the profession at large. Addresses will be delivered by representative educators from both literary and medical schools, and those having special interest in educational work will probably constitute the main portion of the audience. The commencement will be held in the Academy of Music* on Thursday afternoon, May 12, when the valedictory will be given by Professor Charles M. Thomas, M. D.,† and an address by Professor W. Tod Helmuth, M. D.† There will be the usual alumni banquet, with class re-unions, and so forth, to the end of the chapter of hospitalities for which old Hahnemann has a world-wide fame.

Globules.

What ambushed Machiavelli at the Cleveland banquet put that dead fly in the ointment—so that the preacher black-eyed Hahnemann, and the self-imported speaking guest maligned his numerous host—the General Practitioner?

Some years ago, as the result of political agitation within its ranks, the order was divided, and one part thereof called itself the "W. C. T. U. (Non-Partisan)." Possibly at an early day we may learn of a new segmentation, to be styled the "W. C. T. U. (Non-Baking-Power)."

It is of interest to the American Institute of Homeopathy to know that by reason of good management on the part of the general secretary, Dr. E. H. Porter, the Annual Transactions this year have cost one thousand dollars less than the former year.

The Northern Indiana and Southern Michigan Homeopathic Medical Association held its fourteenth semi-annual meeting at Elkhart, Ind., on Tuesday, April 26. A good programme was carried out. The association now numbers some sixty members.

A worthy example! The Class of Pulte Medical College for 1898, instead of holding a banquet, voted a donation of one hundred dollars to the Hahnemann Monument Fund. The faculty of this enterprising college, not to be outdone, will also send one hundred dollars. So that up

* Which is not a church.

†† Who is not a minister of the gospel

to this writing Pulte has contributed about four hundred dollars to the monument fund.

After May 1 Dr. J. Richey Horner will be found in his new offices in the Osborn, Prospect and Erie Streets, Cleveland.

Dr. Eugene W. Sawyer, formerly of the Columbus Memorial Building at Chicago, on May 1 removed to 806 Stewart Building, in the same city.

Has anyone noticed what a striking resemblance there is between the published pictures of Commander Schley and those of our late lamented J. P. Dake?

The rural population is about prepared for its Grand Spring Opening as shown by the appearance of the patent-medicine columns of the daily papers just now.

We have received, within the month, the latest edition (1898) of *Skene's Diseases of Women*; and from a casual examination thereof are much pleased. We expect at an early date to give a good review notice of this foremost book in its specialty.

Is the profession to understand that the potencies advertised in one of the Chicago homeopathic journals by one Ballard, and bolstered up by several members of the Dunham faculty, are in fact recommended and employed by such members of the Dunham faculty? Or is this another instance of using a man's name, and sometimes his picture, without his knowledge, to ballast a questionable measure?

For more than fourteen years, says Dr. F. M. Johnson of Boston, I have constantly made use of a number of the Maltine preparations, and it gives me much pleasure to state that the results have been uniformly and eminently satisfactory. It has been my pleasure to inspect and familiarize myself with the very interesting processes of manufacture, and I was particularly impressed with the extreme care, cleanliness, and nicety that rules and pervades the entire atmosphere of your extensive establishment.

One thousand and sixty-nine miles in less than thirty-three hours in an electric-lighted sleeping car, from Chicago to Denver, over the Omaha Short Line of the Chicago, Milwaukee & St. Paul Railway and the Rock Island Route via Lincoln, Neb.

Time annihilates space, and it is "mighty easy ridin'" on the cars.

Ticket Offices, 95 Adams Street and at Union Passenger Station, Canal and Adams Streets,

Chicago. Train starts every night at ten o'clock. Don't get left!

We note in a recent circular from the Local Committee at Omaha that one of the hotels has been designated as the Institute headquarters. But this does not by any means mean that the other hotels are not as good or that they will not entertain the Institute. At Detroit, while the *Cadillac* was named as the headquarters, many of the Institute's membership, and the General Secretary, went elsewhere. It is to be remembered that the hotel question is an important one. This time in which the Institute meets at Omaha is the Exposition time; and while there is an abundance of hotels and boarding houses it will be wise to engage a room in advance, and so make sure that you will be with your company. It costs but a postal card. Write to Mr. Silloway, proprietor of the New Murray, and then be free of this worry forever.

Is it peace?—Now that the Cleveland colleges have amalgamated, have sat in safety under the same roof-tree for the first time in many years, and in perfect amity and trustfulness, why not extend this same blissful spirit of kindliness to others who were at one time in the thick of the fight, but are now out of both college and hospital? What the Cleveland profession wants is a reconciliation that reconciles. Let the amnesty be so broad and so wide that any former erring brother will find himself welcome whenever he pulls our latch string. Indeed, why wait even for that? There is no happiness except in conferring happiness. Mark how the North and the South have forgotten all their past difference in honoring Fitzhugh Lee, and in the readiness with which all sections are ready to carry the American flag—the symbol of a united country—to the front! Instead of still harboring the old partisan hatred for the fellows in the other college crowd, why cannot Cleveland be really and truly magnanimous, and forget as well as forgive the men who fought us most bitterly—but openly, like an honorable enemy? That college banquet would have been the greater and nobler, if three or four ancient, and one or two modern, fighters could have been made to see the impolicy and uncharitableness of their armed and antagonistic position. Let us have peace!

Do you know that you can travel from Boston to Chicago via the Nickel Plate Railway and its direct connections?

The American Homeopathist.

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The American Homeopathist.

NEW YORK, MAY 16, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



M. C. BOOSING JOHNSON, M. D.,
Chicago, Ill.

THE INTER-STATE COMMITTEE.

UNDER the laudable activity of Chairman Dr. A. B. Norton and Secretary Dr. Allison Clokey this committee, which seemed to presage at its birth naught but an ornamental existence at best, has taken on some very vivid evidences of life. It appears upon our table, and upon that of the several bodies directly interested, in the form of a series of warm-blooded

resolutions, any single one of which would ordinarily exhaust the ability of any ordinary summer-morning committee. Of the nine resolutions the committee calls especial attention to the first, second, third, fourth, sixth, and seventh, which deal with matters which should come before the various State societies at their next succeeding meeting. The paper is addressed to the honorary vice presidents and honorary secretaries of the American Institute of Homeopathy. The first resolution has reference to legal recognition and appointment of homeopathic physicians in all States and municipal offices. The second advocates the value of membership in the Institute. The third encourages application of homeopathic physicians for places in the United States Army and Navy. The fourth, that the term of office of Inter-State Delegates to the Institute be four years, one appointment to be made every two years. The sixth to instruct the Institute secretary to ask the State society officials to consider in open session those matters seeming to them to be of greatest general interest to our profession, and to reduce the same to the form of a brief report to be sent to the Inter-State Committee. The seventh recommends that the Inter-State Delegates to the Institute be the only delegates from that society to the Institute. The eighth relates to the life-insurance problem; and the ninth to license-to-practice legislation. From this *résumé* it must be apparent that this committee has been giving some serious thought to its own importance, and that at the Omaha session much of interest and benefit to the craft may be expected. The visible officials of this Inter-State Committee, Drs. Norton and Clokey, are deserving of much praise for their enthusiastic taking hold of this work.

Materia Medica Miscellany.

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References in this department are made by number. See issue of January 1, or December 15, of each year.

CLINICAL CONFIRMATIONS.

Duboisin 3 IN HYPEREMIA OF OPTIC NERVE.—Dr. C. H. Heltrich⁷ states that Mrs. E. W., aged twenty-one, applied for treatment at his clinic at the New York Ophthalmic Hospital on March 23, 1897. Examination revealed a low degree of hyperopic astigmatism, which was corrected with a ± 0.25 D. cyl., axis 90° , and a hyperæmia of the right optic nerve. Pathogenetic symptoms: Optic nerve red, and its outlines indistinct. Retinal veins tortuous and enlarged. Accommodative asthenopia. Clinical symptoms: The appearance of a red object in the field of vision which moved with the movements of the eye. Remarks: Duboisin 3 was prescribed every three hours and the proper glasses ordered. On her next visit, April 8, she was completely cured, and the nerve appeared normal. Attention is called to the disappearance of the symptom, "the floating red spot."

Kalmia Lat. 30c. IN NEURALGIA OF A STUMP.—Dr. A. Von der Lube⁸ narrates this interesting case: A gentleman, during our late war, was so badly wounded in the upper arm of the left side that it was necessary to amputate it five inches from the shoulder. For many years, at times, he has suffered from neuralgia in the stump. Several operations were performed on the stump and the enlarged ends of the nerves removed. This would relieve him for a while, but then the attacks would be just as severe. He dreaded another operation. At my advice he tried homeopathy. I gave him *hypericum* 30th at first; this had no effect. Then, knowing he had a tobacco heart from excessive smoking, also that the pains would extend over the whole stump and into the muscles of the left chest, I gave him *kalmia lat. 30c*. This gave him prompt relief, so when he has an attack his wife always gives him three or four doses in a day, and he has immediate relief. The attacks are less frequent. This has been used for over two years, and never failed.

Stramonium IN INCIPIENT INSANITY.—Dr.

J. M. Selfridge⁹ treated a young woman of thirty, who was beginning to lose her mental balance. A hereditary taint, a love affair, and spiritualistic séances were ætiological factors.

She was possessed of the hallucination that her grandmother, long since dead, was talking in her ears, and directing her as to what she should do and where she should go, etc. In the night she could not sleep because she heard voices in her ears. She neglects her household duties, and music, of which she is very fond. (She is a splendid performer on the piano.) She cannot sleep, does not want to be alone, and must have a light in her room all night. There is loss of appetite, and she is careless about her personal appearance.

The hallucination, "she hears voices in her ears," was found under stramonium alone, and it was given in the 200th. In five days she was much better, and in six weeks was nearly well. Since then she has had no return of her trouble, but prefers a light in her room from old habit.

Xanthoxylum Fraxineum 30 IN DYSMENORRHEA.—Dr. Martin Deschere¹⁰ reports the case of Elsa N., aged nineteen: Menstrual pain before and after flow. The pains start in the hypogastrium and shoot down the thighs. Sick headache, with nausea and vomiting. The menses are profuse and always late, but preceded and followed by a milky leucorrhœa. The blood is offensive. The patient is of a very hysterical and hyperæsthetic nature. Pathogenetic symptoms: Menses profuse and too early. Cutting pains; sudden pains in right ovarian region, extending down thigh and passing over to left side. Leucorrhœa, white, milky, after menses. Shooting pains from region of right ovary to hip and back, with gushing, milk-white leucorrhœa ceasing suddenly. During menses, which are too early and painful, cramp-like pain in head and abdomen; hungry, but food nauseated; when vomiting the stomach felt as if rising and falling. Clinical symptoms: Neuralgic dysmenorrhœa, pains going down the anterior portion of the thigh, mostly left side. Neuralgic dysmenorrhœa, with neuralgic headaches. Remarks: A powder every night and morning, to begin two weeks before menstruation is expected. The next period set in prematurely, at the time when the leucorrhœa used to appear, but painless.

There was still headache, but the blood was not offensive. The prescription was repeated. The following periods were normal. Headache only occasionally, but no more vomiting.

Natrum Sulph. 30 IN PANARITIUM.—Dr. Deschere²⁰ also tells of a chambermaid, aged twenty-one years, who had a panaritium on the first finger of her right hand, about six months ago, which suppurated and caused much suffering at that time, making her unfit to do any work for ten days. Now the left index finger is affected in same way. Whole of second and third phalanges was swollen and deep red. Pain was severe, and she had passed a sleepless night with fever. There was no fluctuation, and I told her I would try and stop the trouble right there. Pathogenetic symptoms: Sticking ulcerative pains under nail of right index finger, and similar pains in the phalanges of various fingers. Pulsation in tip of little finger, etc. Clinical symptoms (Allen): Panaritium, the pain is better out of doors. Remarks: In watery solution, a teaspoonful every two hours. After two days she came in smiling, the pain having ceased rapidly, and the swelling had commenced to decrease. After two more days the finger was well.

Nux Moschata IN PROLAPSUS UTERI.—Dr. Neatby.⁷—Mrs. G., æt. thirty. Has suffered for many years from "prolapsus uteri." The trouble is constantly brought on by exertion even of trifling character. A comparatively short walk is enough to cause a "descent of the womb." She had worn two ring pessaries, but had discontinued their use as she was unable to retain them. They came out with every motion. She suffers from constant pain in the back below the waist, and from a dragging pain from the shoulders downward. The pain is worse just before each period, but there is no pain during the period. She has no bearing-down sensation. The period is sometimes seven days too soon, and sometimes fourteen days too late, and is occasionally profuse. She frequently has a troublesome leucorrhœa for a week before the period. There is an occasional headache right through the temples, just anterior to the ears. She complains also of pain at the back of the neck. She sleeps well, but gets drowsy by about 9 P. M. She has long suffered from palpitation,

which is worse on exertion or on going to bed. There are no dyspeptic symptoms, no "globus" or faintness, but sometimes numbness of fingers.

Nux moschata 4x, m. iii. ter. Ten days later reported. Altogether much better. Feels very little of the pains in the back, and nothing of the pain in the neck. Has entirely lost the nervous, restless feeling she had. Has much less palpitation but still some headache. The leucorrhœa has disappeared. There has been no return of the prolapse, though the patient has frequently made such exertion as always formerly sufficed to bring it on. The last period came on prematurely.

July 27. One month later reports herself as better than she has been for a great many years. The leucorrhœa is better. She is free from the pain in the back and continues entirely free from the prolapse, though working harder than when she was constantly suffering from it.

No local treatment has been adopted in this case. There has been no change of air or rest of any kind. During the treatment the patient's circumstances have been getting more and more trying.

MEDICAL MEMORANDA.

Iodide of Potash AS A DIAGNOSTIC MEASURE IN PULMONARY TUBERCULOSIS.²¹—Several years ago Dr. Stiker of the Faculty of Medicine of Geisen, Germany, announced that the iodide of potash, in a daily dose of $7\frac{1}{2}$ to 15 grains, in cases of suspected pulmonary tuberculosis, would give rise to a local catarrh in the diseased part and increased expectoration, in which the characteristic bacilli would be detected. Dr. Vetlessen has also tried this method, administering to twenty-seven patients a 1.5 per cent. solution of the iodide, in doses of a teaspoonful, three times a day. In eight subjects he had positive results, for in two or three days the expectoration increased, together with the cough, and auscultation revealed sonorous râles in different parts of the lungs where no pathological signs had as yet been noticed. In four of these patients the tubercle-bacilli could be discovered; in the others, other signs, as enlarged glands and tubercular osseous lesions,

facilitated diagnosis. The other nineteen presented no reaction in the lungs, and he considered them as non-tuberculous. For, indeed, in none were either there bacilli in the sputa, nor did tuberculin give a reaction. Therefore, he recommends this measure to physicians who have not the means at hand for a bacteriological examination of the sputa.

Some years ago there was reported, in a Russian journal, the case of a healthy young woman who immediately developed tuberculosis of the lungs, which ran a rapid course, after taking the iodide of ammonia.

Eucalyptus Globulus IN STRYCHNINE POISONING.³¹—Dr. Monfrida Musmecin³² has found that a decoction of the leaves of eucalyptus globulus and a solution of a salt of strychnine formed a flocculent precipitate of a clear color, a solution of citron-yellow tint remaining above, and the strychnine losing its bitter taste. This raised the question as to whether eucalyptus was an antidote for strychnine. The author carried out a number of experiments upon animals to ascertain what effects would be produced by giving these two drugs together, and what antidotal power eucalyptus would exert after the development of the symptoms of strychnine poisoning. He found that when these drugs were given simultaneously the animal survived, while, if the same amount of strychnine were given alone to an animal of the same kind and size, death would ensue.

In another set of experiments the eucalyptus was given after convulsions had appeared, and then these became much less marked, and even disappeared. From these experiments the writer believes that eucalyptus has a real antidotal action, and that a practical application of it should be made by employing a decoction for washing out the stomach in such cases.

The Poison of the Honey-bee.—Dr. Langer³⁰ has examined the poison of the honey-bee, in search for its active principle. He used in his investigations twenty-five thousand bees.

The freshly discharged drop of poison is transparent and colorless, of acid reaction and bitter taste, and has a fine aromatic odor, well brought out by rubbing it between the fingers. When dried at 212° F. there is left gummy residue. The specific gravity is 1.131. It is

clearly soluble in water, but with alcohol it forms at first an emulsion, while continued action causes a granular precipitate.

Formic acid is readily shown to exist in the poison, but the real active principle is not this acid, but rather an organic base which in the free state is only soluble with difficulty in water, and is held in solution in the poison by means of an acid. The composition of the active principle was not determined, owing to scarcity of the material.

Kreosotum IN ECZEMA.—Dearborn of New York³³ asserts that, while carbolic acid is the chief principle in kreosote, there is difference enough in the pathogenesis of the two drugs to give each a distinct place as a remedy. Kreosote disorders the blood, produces an irritant effect on the mucous membranes and the skin, which may thus cause local or general disturbances of nutrition, derangement of function, or inflammation of the surface tissues. Through its action on the nerve centers, a great variety of paræsthetic sensations may be felt.

On the skin it produces functional derangement of the sebaceous and sweat glands, a tendency to ecchymoses (from slight causes), papules, vesicles, fissures, scales, and crusts, persistent and unhealthy in character, sometimes degenerating into malignancy, with offensive secretions and, rarely, a gangrenous tendency. Sensations indicating kreosote are more often described as burning, itching, biting, stiffness, or tensive pain. The favorite locations for papular and scaly eruptions are the backs of the hands, the face, ears, back, and shoulders; for fissures, the hands, and on or about the lips; while vesicles or wheals may occur at these points of selection or generally over the surface. The eruptions are worse, as a rule, at night in bed, from pressure of clothing, from friction, but may be relieved by scratching.

Papulo-squamous or papulo-vesicular eczema of the dorsal surface of the fingers and hands, sometimes excited by repeated contact with irritating substances (trade eczemas), and obstinate in course, frequently present enough indications for kreosote to make it a curative remedy. Moist eczemas of the face or ears, with offensive secretions, burning and itching pains, worse at night, may be cured with this drug.

PREVENTION OF OTITIS MEDIA CATARRHALIS CHRONICA.

By E. H. BALDWIN, M. D., NEWARK, N. J.

PREVENTION of chronic catarrh of the eustachian tube and middle ear lies in the domain of the general practitioner rather than in that of the specialist, because the great majority of "earaches" are treated by the former, and acute otitis media is the most frequent cause of the chronic variety. Other causes—pregnancy, syphilis, scrofula, or other cachexia—must be recognized; but prominent above them all, because so much more frequent, stand repeated attacks of acute catarrh—the common earache. There is possibility for harm in every one—strong probability for permanent injury when the attacks are repeated. Let me quickly review the process in the eustachian tube and middle ear during one of these acute catarrhs. It is not necessary, because not practical, to draw fine clinical distinctions between the "tubal catarrhs" affecting only the eustachian tube, and the more general variety, which passes on to the middle ear. They are practically one, so far as this paper is concerned. First, the pharyngeal mouth of the eustachian tube becomes closed, and immediately its very important functions of ventilation and drainage of the middle ear are suspended. The air left in the tube and middle ear is soon absorbed by the surrounding tissues, causing a vacuum and attracting a rush of blood from all directions. Thus congestion is established, and the more tightly the eustachian tube be closed the more intense is the congestion. The next step is a profuse sero-mucous hypersecretion, which, by the admixture of detached epithelial cells undergoing fatty degeneration, becomes thick, viscid, and tenacious. The great pressure inside the sensitive middle ear causes intense pain, and the "earache" is now making it interesting to the patient and the rest of the household.

Examination *per speculum* would show the tympanic membrane of a pinkish, or even coppery-red color, and bulging outward from the contained secretion. Should the inflammation be sufficiently intense, the catarrh will pass over into the purulent form, and only subside after perforation of the membrana tympani; but this

condition is not within the limits of this paper.

Now, there are three other possible terminations of the acute catarrh—complete resolution, partial resolution, and, finally, the establishment of chronic catarrh of the middle ear. In any case the active process subsides, the pain ceases, and the desired relief is found. I say "relief" advisedly, because, when the pain ceases, the "earache" is almost universally looked upon as having come to its natural end, everybody is happy, and the household returns to its natural quiet. Not one person in a thousand seems even to imagine that further treatment of any kind is needed. The laity almost invariably neglect these cases, and even physicians let the patient pass out of their observation, with simply a warning to avoid catching cold or getting the feet wet. To be sure, the patient is somewhat deaf, and his head feels full, but this is expected to "come around all right" in a few days. What of the eustachian tube, with its walls pasted together—filled with sticky mucus—even pus, perhaps—and the delicate middle ear, with ossicles buried in the same tenacious mucus, and walls denuded of epithelium? What is to become of this secretion, and what is to prevent its organization into tough bands, binding down the ossicles and membrana tympani, and causing permanent loss of hearing? And yet this is the state of affairs so often left alone to "clear up by itself—to come around all right." Such neglect by a physician is almost malpractice. Perfect resolution does occur in those so fortunate as to possess a vigorous and otherwise healthy mucous membrane; but is this happy termination to be expected in the average catarrhal subject, in this climate? Would you want to take the chances in a personal test?

Partial resolution is the most common result, attended by slight loss of hearing—not noticeable, perhaps, but only waiting another attack to develop its latent power for permanent injury. But when the tendency is toward the chronic condition, the process will certainly produce deafness, unless vigorous and persistent treatment prevents. The danger most to be dreaded is the formation of interossicular adhesions, and retraction of the membrana tympani, caused by formation and subsequent contraction of mucous

bands. The ossicles are thus bound down and cannot move, while the membrana tympani are dragged upon until, with mobility lost, the function of transmitting sound-waves is practically ruined.

Adhesions also occur with but little secretion; the ossicles, especially the stapes, becoming fixed from shrinking and induration of the mucous membrane and ligaments. This constitutes true sclerosis.

Thus we find, among the results of acute catarrhs, stricture or even occlusion of the eustachian tube; great rigidity of the ossicles and membrana tympani; mastoid cells reduced in size, and even obliteration of the middle-ear cavity; while in those of gouty or rheumatic diathesis, limy deposits may occur.

In the face of these facts and possibilities, is the after-treatment of common earache something to be neglected? We must prevent the formation of the mucous bands, and their retraction of the tympanic membrane, by using the Politzer air bag and pneumatic speculum, three or four times a week at first, and once or twice later. The former opens the eustachian tube and gives the middle ear a chance to get rid of the secretions, while the later prevents stiffness and ankylosis of the tympanic membrane and ossicles. This mechanical treatment is too important to be neglected. Finally, study the case *thoroughly*, and give the remedy *most truly homeopathic* to the conditions. Here is where we can far excel the old-school physician, in bringing the tissues back to their natural condition. The remedies of greatest value are those that restore circulation to mucous membranes—the kalis (especially the muriate), mercuries, lime salts and their combinations, with iodine. Give the remedy persistently for two weeks at least, while using the Politzer bag and pneumatic speculum, as described, and you will have the satisfaction and pleasure of a patient saved from almost incurable deafness. The writer has had under his care a number of cases of chronic aural catarrh resulting from neglect in the treatment of the acute variety. These cases have prompted the writing of this paper, and if one practical suggestion has been given and received it has not been written in vain.

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Phil. No. 50.

The Medical Record:

A propos of your query, "Should Ministers Pay Doctors?" I would like to relate an incident that happened several years ago in a small town something less than a thousand miles from here. I was summoned one morning to see the son of a local minister. The boy was an only child; he was the idol of his parents, and all their hopes were centered in him. His sickness developed into one of the worst cases of typhoid fever I have ever seen, and I attended him assiduously day and night; for weeks his life hung in a balance, and, in addition to being the physician in the case, I was called upon to do a large share of the nursing. Finally he began to improve, and with care and attention his recovery was assured. The minister and his wife could hardly find words with which to express their gratitude; they fairly wept for joy, and assured me that they were under everlasting obligations to me for having saved their darling. Some time after the case was discharged the minister called to see me and asked for my bill. I told him that I had no bill against him, and that I made it a rule not to charge the local ministers for my services. He left with the most profuse thanks and every assurance of gratitude, etc. Two or three weeks later I met him again; he said he had talked the matter over with his wife, and they had decided that it was nothing but just and right that I should be paid for having saved their precious boy; they were anxious to show their gratitude in a practical manner, and they would feel very much hurt unless I accepted something from them. I told him then to send me whatever he thought would be a proper fee for attending so grave a case, and that I would leave it entirely with him. A few nights after this I returned home from a long and tiresome drive in the country, and had sat down to a cold and scanty supper, when my wife smilingly brought forth a package, carefully wrapped and tied, and addressed to me with the compliments of Mr. and Mrs. So-and-So. We were all agog with curiosity and excitement, and couldn't open that package fast enough. We didn't take time to untie the string; we cut it,

and, after removing sheet after sheet of wrapping paper, came to a pasteboard box—a shoe box. We lifted the lid carefully, and there in the bottom of that box reposed, not a gold watch and chain or a cut-glass vase, but a pineapple—a miserable, little, weazened, shriveled-up pineapple that could have been bought anywhere in that county for five cents! I learned afterward that my ministerial friend had been presented with a barrel of them. “Should ministers pay doctors?” They pay me.—*Junius F. Lynch, M. D., Norfolk, Va., December 11, 1897.*

The Medical Brief:

But, alas! just as health boards were riding securely upon the topmost wave of Klebs-Loeffler bacillus popularity, some bacteriologists, with Macbeth-like consciences, have reluctantly admitted that the Klebs-Loeffler bacillus is not at all diagnostic of diphtheria. It seems that this germ may be present for months at a time in the throats of perfectly healthy children, and that repeated and painstaking examinations may demonstrate its absence in the most virulent cases. Bacteriologists, beginning with the least enthusiastic and most conscientious, are coming logically and inevitably to see that germs are effects and not causes, and that they may be found wherever morbid secretions afford a fertile field for their cultivation. A diphtheritic throat may, or may not, afford such a field, depending upon the vitality and nutrition of the throat structures, the amount and character of the exudation, etc. So, in very severe cases, an extensive, but well-organized membrane, with dry and swollen surrounding structures, offers a very poor medium for the development of the germ. The diphtheria itself is undoubtedly begotten in the constitution, escaping by the throat. The presence or absence of germs signifies little except to health boards, to whom germs are the chief source of power.—*Editorial.*

The Homeopathic World (London):

Dr. Clarke, the accomplished editor of the (London) *Homeopathic World*, in an editorial leader, April 1, calls attention to a book issued by Hobart Amory Hare, M. D., B. Sc., Professor of Therapeutics in Jefferson Medical College of Philadelphia, bearing the title—“Practical Diagnosis: The Use of Symptoms in the Diagnosis

of Disease.” Dr. Clarke makes two quotations, one from the prospectus of the book, and the other from a review notice of the book in the *Medical Review*, which we also quote, and in full:

“The object of this volume is to place before the physician and student the subject of medical diagnosis as it is met at the bedside. To accomplish this the symptoms used in diagnosis are discussed first, and their application to determine the character of the disease follows. Thus, instead of describing locomotor ataxia or myelitis, there will be found in the chapter on the Feet and Legs a discussion of the various forms of and causes of paraplegia, so that a physician who is consulted by a paraplegic patient can, in a few moments, find the various causes of this condition and the differential diagnosis between each. So, in the chapter on the Tongue, its appearance in disease, both local and remote, is discussed. In other words, this book is written upon a plan quite the reverse of that commonly followed, for, in the ordinary treatises on diagnosis, the physician is forced to make a supposititious diagnosis, and, having done this, turn to his reference book and read the article dealing with the disease supposed to be present, when, if the description fails to coincide with the symptoms of his case, he must make another guess, and read another article. In this book, however, the discovery of any marked symptom will lead directly to the diagnosis. Thus, if the patient is vomiting, in the chapter on Vomiting will be found its various causes and its diagnostic significance, and the differentiation of each form of this affection from another. . .”

“This book is one of the best of its kind we have ever had the pleasure to peruse. It is a great triumph of the author to encompass such an enormous volume of practical points in a work of convenient size. Its great practical utility is suggested by the title. It is unique in many respects, and the author has introduced radical changes which will be welcomed by all. In the first place, the book is written from a clinical standpoint. The logical sequence of the book is to lead to a diagnosis from a study and grouping of individual symptoms. Anyone who reads this book will become a more acute observer, will pay more attention to the simple yet indicative signs of disease, and he will be-

come a better diagnostician. The book has two indispensable indexes—Index of Diseases and Index of Symptoms, Organs, and Terms. The latter makes the work especially valuable as a clinical manual, as the diagnostic worth of any symptom can be found in a moment. This is a companion to 'Practical Therapeutics,' by the same author, and it is difficult to conceive of any two works of greater practical utility. This book should become a text-book at once."
—*J. H. Clarke, Editorial.*

The Louisville Times:

There is a little joke going the rounds on our friend Dr. A. Leight Monroe.

"I tell you, Leight," says a clubman roguishly, "it's a mighty lucky thing for you that your practice is limited to this country."

"Why?" inquires the doctor vaguely. "I never thought of practicing anywhere else, did I?"

"Oh, well, if you can't understand, I'm not going to explain," giggles the clubman as he goes away laughing.

"Oh, doctor," exclaims a pretty patient, "aren't you glad you don't have to practice in Spain? Why, you would be mobbed or starved there."

"He wouldn't be any better off in France," interrupts a dude in a Babel-tower collar.

"Nor in Italy, or Austria, or Germany," says a fat capitalist with a double chin, and greasy laugh. "Ha, ha!"

And all this time Dr. Monroe is kept guessing as to why he would be left to starve abroad, and why people seem to think he had some intention of going away from his own country to practice medicine; and it was only when some kind friend took him aside and explained that foreigners hated and refused the Monroe doctrine that he caught on.

Look out, jokers; the doctor is loaded to-day and ready to issue an ultimatum!

The Clinique:

The close of another college year, and the sending forth of our graduates, suggest a few reflections upon the advantages that have been afforded them, and the corresponding quality of the product. There are those who insist that while the modern methods of instruction are

more showy and attractive, they are less thorough and practical than they formerly were; that the medical sciences are being taught with an almost total disregard of their bedside relations; and that special lines of study have taken the place of an all-around preparation for the duties of the physician. . .

There is a peculiar fascination about the scientific branches that have so come to the front within a very few years. The teachers who are chiefly devoted to them are young, enthusiastic, and more at home in the laboratory than in the hospital or the sick chamber; and, naturally enough, the spirit and emphasis of their instruction are not always clinical. . .

This tendency is counterbalanced, however, by the advanced courses of practical clinical work that are afforded in the "Old Hahnemann." For example: At the annual meeting of the faculty, a few evenings since, it was shown that, during the winter term just closed, its four graded classes had listened to the lectures that actually were delivered in the department of *Materia Medica*, as follows: First-year students, 81 lectures; second-year students, 61; third-year students, 36; fourth-year students, 104; total, 282. These lectures were given by the seven professors connected with that department, and included the following subjects: The Organon and Institutes; Medical Botany; Prescription Writing and Pharmacy; *Materia Medica Proper*, and *Applied Materia Medica*.—*R. Ludlam, Editorial.*

The Homeopathic Review (London):

I went on Sunday afternoon to see A. B., who was very ill. Patient was in bed, throwing himself about, talking nonsense, jerking his arms, laughing, starting violently when spoken to or touched. He vomited green matters, and complained of a violent pain in his head—"right in the hairt of his heed," as he explained afterward. His pulse was very full and very fast, his head burning. Every few minutes he asked for water; *but he said that it was black, and that everybody looked black.*

In these days of influenza, he got first what had been taken down for him: a couple of drops of pyrogen 6. Under this the pulse moderated; he became more quiet, ceased to de-

mand water, and was able to describe the fearful pain—like no pain that he had ever felt before—right in the middle of his head. But everything still looked black, and again he vomited green and bitter stuff. For that he got one dose of crotales, which did not stop it; while the symptom, "everything looks black," was referred to Allen.

Stramonium turned out to be the medicine, covering the whole case perfectly: tossing, starting, jerking, fever, green vomit, pain in head, and the keynote—"your face is quite black!" Luckily, I had a good supply of stramonium 30; and under its influence he soon dozed off comfortably. The globules were continued, from time to time, all night. In the morning he seemed all right! By midday he was up and sitting by the fire, without a single stramonium symptom left. When his wife laughed at him for behaving so oddly the evening before, he said that what he imagined was, that he had a bran bag under each arm, and that he fitted his head into one, and, as that was not right, he took it out, and fitted it into the other.—*A Correspondent.*

The Critique:

At the next meeting of the Institute the question of permitting the formation of auxiliary organizations, like the Materia Medica Conference and the H. O. O. & L. A. (which meets in Chicago this year), should be seriously considered, and, if possible, a check put upon any further attempts in that direction. Such organizations are a great source of weakness and danger to our national body and must eventually destroy its usefulness. They are wholly unnecessary, and are a direct means of detracting from the attendance and importance of the Institute itself. All that they attempt to accomplish can better be done within the parent body in the form of sectional work, and thus aid in maintaining one strong, powerful, and influential central organization, which shall foster and advance all the varied interests of our school. We should take a warning from the American Medical Association, which has been greatly weakened by these collateral societies; and we cannot afford to suffer a similar fate by permitting the evil to grow in our own ranks. "*By uniting we stand, by dividing we fall.*"—*Editorial.*

The Alkaloidal Clinic:

SOME CONSULTANTS.—Mr. B., aged sixty-five, had sunstroke; temperature 105° F., pulse 165. This was more than five years ago. My treatment was first a drink of whisky, then cold water, then strychnine and digitalis. I did not consider it a serious case, except as to the heart function. The treatment seemed to be sufficient, so that, twenty-four hours after being first called, I found the temperature 99° F., pulse 90, with the objective symptoms of the pulse improving. Now I was asked to meet an older physician in consultation, and, of course, did so. His first observation, after having learned my treatment, was, "You don't need anything for the heart now, so quit that digitalis and strychnine, and give him chloral and bromide to quiet him, and let him alone; and if you find to-morrow that he needs heart tonics, there will be plenty of time to give them." I explained as best I could the tendency as I understood it when first called, made a poor little weak, indefinable kick, and quit the digitalis and strychnine.

Next morning I was alone in the case, the consulting physician having done all he could. I found the heart-beat 135, and failing. I stayed and did all I knew, but I never could have any effect on that heart again. So, in eight hours more, it had failed; and next day was buried, as I believe, one of my mistakes. I believed then, and believe now, that had no consultation been had I would have one less mistake buried.

My little boy, now three and a half years old, when nineteen months old, had a progressive broncho-pneumonia ushered in by a convulsion, remaining unconscious the entire time of sixteen days, except about five minutes on the morning of the ninth day.

A neighbor physician (a conscientious gentleman) prevailed upon me to give him chloral hydrate. I was afraid of it, and said so to the doctor; but his experience had not taught him to be afraid of it, and he so expressed himself. So I gave 2½ grains; in two hours, the child being no better, I gave 2½ grains more; then, in thirty minutes, I saw what I had done. The child was much worse. I had the so-called exceptional action of chloral hydrate. The child was a raving maniac for twenty-four hours.

During that twenty-four hours I had an ex-

perience I had never before had, and hope never to have again ; and it seems to me that I ought to have known better than to give chloral in a case after an acute illness of that kind lasting over two weeks.

I remember that experience, and if I live until my head is as gray as Methuselah's cat's tail, I will not forget it. The boy will be four years old in July, and has had no sickness since ; but if he does, he will get no chloral from me, especially after a two weeks' serious acute disease.—*J. R. Landers, M. D.*

The Medical Century :

A word, and just a word, in relation to the final statement, "The homeopaths have not made a single advancement in scientific knowledge since their foundation, eighty-seven years ago."

Can this be true? What are the records? Homeopathy is pre-eminently a system of therapeutics. It deals, primarily, with the cure of the sick. In the department wherein the allopathic profession is most inefficient, it is proven to be most efficient. Leaving investigations in the common branches of medicine and surgery largely in the hands of the old school, it has busied itself chiefly with developing a system of curative therapeutics. Has it been successful in this? What say the records of the insane hospitals of the various States in which allopathy and homeopathy both have institutions? In every instance these prove that the treatment of the homeopathic school has been, and is, the most successful. Likewise in the various county and city hospitals in which the two systems are practiced side by side. Likewise the mortality records of fourteen of the largest cities of this continent. We have made such advancement in the treatment of scarlet fever, for instance, as to bring our mortality records to one-half of that of the old school. In diphtheria we have reduced the mortality more than one-half. In yellow fever we have shown that we can reduce it more than two-thirds. In typhoid fever it has been demonstrated that we can save more than twice as many lives as can the old school. Surely, here is a "development" that means more than the discovery of a new bug, another toxine, a new blood-corpuscle, or the neuron. In the line in which we have chiefly employed

our talent, we have developed so much that the old-school profession, and the world at large, would be far better off if they would discard their treatment entirely and substitute ours therefor. And, as so ably shown by Dr. Dewey, formerly of San Francisco, they are rapidly doing this very thing, as the system of larceny they are pursuing will demonstrate, despite the fact that, according to them, we have made no progress in almost a century.—*Editorial: The Modern Ananias.*

The Medical Mirror:

Which reminds me that the doctor can often, in the sickroom, throw in a little piece of poetry with a nugget of sentiment in it, that he has torn out of a newspaper or a magazine, on the fly, as it were, or evolved from his own inner self, to very good advantage ; many times it will do more good than a pill or a potion. We must remember that, after all, we doctors possibly do most good with the drugs we never give.

Certain it is that the patient whose doctor relies upon his physic to do his work stands a poor chance of getting well.

When I am sick I want the man to care for me who will take command absolutely, but who at the same time believes that the three best medicines on earth are air, water, and mercury,—the therapeutic trinity,—and who will steer me back to health along the Big Four Route—Elimination, Disinfection, Nutrition, and Tranquillization.

Yes, a little poetry, good cheer, a good story, or even a snatch of a song, given briefly, in the right way, at the right time, to the right person, will often save the sick victim the necessity of a dose, but unless the doctor knows how to administer them deftly, gracefully, they had better be left ungiven, and the same remark will apply to the needful medicinal dose.

Brains, backbone, and tact make a good combination for a doctor.—*Editorial.*

The Pacific Medical Journal:

Libel consists in the utterance of any communication otherwise than by oral speech unjustifiably accusing private individuals, officials, or governments of anything tending to make them ridiculous or injure them in reputation or public esteem. Slander is an oral statement un-

justifiably accusing a person of a crime, a loathsome disease, incapacity, or dishonesty, or of any fault which tends to injure the person or his business. The courts have decided that an accusation may be slanderous or not, according to the vocation of the accused. To accuse a physician of general professional ignorance or malpractice is actionable *per se*, but to state that in a special case he was at fault is not slanderous, unless special damage is proved. A retired physician, since he no longer gains his living by his profession, may be accused with impunity of what would "slander" a man in actual practice. Slanderous words uttered in one State may not be actionable in another State, unless proved to be so also in the place uttered. A person uttering slander to a second party, who repeats it to the detriment of an individual, may escape responsibility if the damages result from the utterance of the second party and not from that of the originator. In case of libel, any accusation holding a person up to scorn or ridicule, whether professionally or as a private person, is actionable. A physician who attempts to achieve notoriety by puffing himself cannot recover damages from those who further his attempts. It is slander to falsely attribute a contagious disease to a person, unless a statement was necessary and there was a mistaken diagnosis. A physician condemning any article used in medical practice is liable to the manufacturer, if the said physician's statement be incorrect.

The Charlotte Medical Journal:

I studied medicine, not to have a vestibule-train title attached to my name, but to insure me bread and meat and some of the comforts of life. In 1887 I received my diploma and was prepared to practice, but soon found that beyond a living I could not create any large bank account. In 1896 I cut loose from the practice of medicine as the sole means of making a livelihood and coining money, and hit the trail of the almighty dollar like a hungry coyote chasing a corpulent jack rabbit. I did a great deal of work for sweet charity's sake and in the hope of climbing higher and securing my share of the practice among the wealthy. But, to my sorrow, I found that the laity thought I was only bilious, instead of full of the grace of God. I concluded that charity, glory, and practice, like

oil and water, would not mix—at least in a business way. Being averse to living on hope and hominy, I prepared to merchandise and farm to make money; and determined to continue the practice of medicine, not for glory and charity, to be bestowed by the laity, but to pay the assessments on my celestial policy to mansions in the skies. . . . I will venture this suggestion: That the Charlotte Medical Society formulate a plan wherein accounts will be put into the hands of the society for collection. The society will employ an accountant at a fixed salary. Each member at the end of every month will be required to turn over to the accountant the amount of work in detail done by him. The accountant will receipt him for the same. All accounts will become due at the expiration of three months, and are to be collected by the accountant and paid over to the members, each member receipting the accountant for the amount collected and paid over to him on his individual account. We are always starting a craze intended to relieve suffering humanity. Is it not time for us to start one that will relieve us pecuniarily? The fad at the present time is appendicitis. Soon we will have appendicitic sermons, bonbons, hats, and appendicitic drinks. Let us start a fad on organization that will eventually prove lucrative to the profession. Let us not approach this subject timidly—not with long teeth, like a politician eating crow. Let us make it a fad that will spread over the land like the gripe bacilli—and, in the near future, we may hope to derive some material benefit therefrom.—*J. J. Hawkins, M. D.*

ALL'S QUIET ON THE HURON.

WHAT a long period of calm has settled over the former field of strife at Ann Arbor! The field is there still; so are the school and hospital, and the regents, but the strife is absent. May one not, therefore, assume that it was the faculty itself that caused all the disturbance? If not, why not? Every report now from Ann Arbor is of praise. The school is doing good work, "square" work, and just such work as we are authorized to receive—in practical, professional life. The hospital is filled to overflowing: more beds have been crowded into the given room space; but now

even this will no longer suffice—and more room must be provided. The class is large, enthusiastic, and ambitious. The revenue received from the hospital during March of this year is \$400 greater than it was for same month in 1897. And money talks! The four-day Practitioners' Clinical Course has just been concluded, and to the satisfaction of all participating. Each day was filled with interesting and instructive specialty work. Professor Kinyon, our old American Institute friend, has done many major operations; Professor Le Seure did as well; Professor Copeland ably held up his end of the specialty line; Professor Dewey gave Neurological Clinics; and Professor Hinsdale was in attendance at all times with the clinical material. So well satisfied were the physicians who attended the course that they passed a series of highly complimentary resolutions, suggesting and recommending that the Practitioners' Clinical Course be made an annual occasion. And then there was Professor Samuel A. Jones, the first homeopathic dean of the school, who also gave an instructive lecture. In a very few words, the Practitioners' Course was a success, as is the faculty. Indeed, it is the faculty which interests us most thoroughly. They have been attending to their "knitting" from the first day of their appointment: for a time it was made uncomfortably warm for them, but victory came. There has never been a day of disagreement. Each had his place, and knew where it was. He was not concerned in his brother's business. He let his brother be his own keeper. When one remembers the quarrels of the former régime, it is truly remarkable how one determined barrator can set people, ordinarily the best-tempered and most even-mannered, by the ears. Think of the trials and tribulations this school has undergone, almost to its undoing; and chiefly because there has always been some one man in the faculty who could not rest unless he was stirring up someone with a sharp stick! This later and present faculty is different also, in that it does not neglect the work for which the State of Michigan pays a good salary, and then "traipse" all over the State doing private operations, and the like, for a good, stiffish fee, to the discomfiture and financial loss of the local profession. The break had to come, and it came.

That faculty, after quarreling with each other like a parcel of schoolboys, after almost disintegrating the school itself, was bundled out, bag and baggage. Then, not content with having set the regents and the legislature by the ears, it must needs also get the American Institute of Homeopathy in the mire.

So we say, again, that the present peace and harmony and success prove that the former devilment was caused by the faculty itself; and when that element was eliminated peace returned. The regents have demonstrated that they can pluck victory from an almost conceded defeat. Their first wise move was in throwing out the discordant element, and the next the careful selection of the present faculty! We are personally acquainted with all but one of the present teachers, and we know them to be first-class teachers and faithful homeopaths; and that a student going there will be taught not only the specialties up to the latest notch, but also homeopathy according to definition of the master.

CRIMINAL MATERIA MEDICA.

DR. WILLIAM B. CLARK of Indianapolis sends the following clipping:

INDIANAPOLIS, March 2.—As J. H. Gruenert, a saloon keeper on South Street, and his bartender, George Bergman, were cleaning up his saloon last night, a stranger entered who claimed to be selling a new and wonderful patent medicine which would cure a headache instantly. All that was required was to take a sniff of the medicine, and the headache was gone. He described it as containing choice perfumery, and finally induced the saloon keeper and the bartender to take a sniff. Gruenert took a sniff and handed the bottle to Bergman, who did likewise. They knew nothing more till they were found and restored to consciousness several hours later, and the cash drawer, which had contained about \$150, was empty.

And adds: Apparently the most skillful materia-medicians and therapists of the world are the criminal classes. Could any medical man do the first part of that trick with anything short of anhydrous hydrocyanic acid, which would not complete the second part—"consciousness restored"? And who knows *exactly* what "knock-out" drops are?

CHIRONIAN NOTES.

[N abscesses, exquisite sensitiveness to touch would indicate *hepar sulphur.*, while absence of sensitiveness would call for *kali muriaticum.*

Remedies given homeopathically for burns are *cantharis*, *hamamelis*, *capsicum*, and *uva ursi*. *Urtica urens* is especially indicated in burns extending into the deeper structures.

The fluid from an ovarian cyst is usually more or less colored and syrupy, that from a parovarian cyst is clear and limpid.

A valuable remedy which is not used often enough is *ocimum canum*. It is indicated in renal colic and in the uric-acid diathesis.

Diseases depending upon a strumous diathesis are often helped by the *iodides*, especially *iodide of iron*.

Ferrum reductum i.e. trituration, sprinkled on food, or grains v., t. i. d., produces excellent results in cases of simple anæmia.

It is a mistake to force feeding in fever patients. The stomach is disabled and cannot be expected to digest the quantity of food crowded into it.

Extreme distention of the abdomen with gas is very painful, and may demand relief by aspiration.

Percussion over a distended bladder may give a tympanitic note. This is due to inflation by gas resulting from ammoniacal decomposition of retained urine.

Kali chloricum is a useful remedy in gangrene of the mouth. It may be used locally in a saturated solution and also given internally.

A vaginal douche of lysol, one per cent. to two per cent. solution, may be given just before delivery in women who have a discharge that is suspicious of gonorrhea.

Correspondence.

Editor AMERICAN HOMEOPATHIST:

I a Student in Medicine and one of your readers in a physicians office would like a few remarks on a recent article termed "Liberty" 14th amendment Law Penn. Act.

Next what requires a M. D. to pass a bord, under the word of "Liberty" 14th ammendment of the Law.

Next How can a Dr. be sued for Practice of Medicine in U. S. A. A free Country.

Next, Why not publish and Enlight Every true and noble reader of your valued "American Homeopathist, a noble Papur.

Next. As not a man a right to Practice medicine in Pa. without passing the bord. also in Mass. and New Jersey under the present Law of 14th Ammendment of Supreme Court, act.

Yours for Justice

"STUDENT."

ANN ARBOR, March 19, 1898.

Editor of AMERICAN HOMEOPATHIST:

Having had occasion to bring a patient for an operation to the Homeopathic hospital here, I was astonished to see the change since I was on the benches to be quizzed. The hospital is running at nearly its full capacity, and I could not help comparing the situation now to what it was in my time. Surely Homeopathy is having what looks like a big boom.

While talking with one of the Ann Arbor homeopathic doctors about the great change in hospital matter, I happened to say that the faculty must have humped lively to get things in the shape I saw them. He said that wasn't it at all. He said the faculty don't do things as they did when you were here. I asked him how. He said you know when you was here if a hospital patient had any money, there was those in the faculty who got them as private patients in some boarding house. The present faculty don't skin the hospital in that way, so the hospital shows just what is being done now, and the old school isn't poking fun at the empty beds in the homeopathic hospital now days.

Come to think of it I remember in my time a patient used to show up at the college clinic once, and then we students saw no more of them only when we met them on the streets. I didn't put this and that together then but I do now.

The moral is if a college hospital is made a feeder for a specialists' pocket-book it will have beds to burn. Better "fire" a few specialists, I say, and so will every old student who will make a visit to the hospital now.

ONE OF THE CLASS OF '90.

How much did you subscribe to the Hahne-mann Monument Fund for a birthday offering this year?

An exchange reports that in an examination that was made of some "electric belts" sold by a street fakir, it was found that beneath a strip of gauze was a layer of dry mustard. When the wearer perspired a little the mustard was moistened and set up a burning sensation, and the deluded victim believed a current of electricity was passing through him.

Book Reviews.

ALASKA—ITS NEGLECTED PAST, ITS BRILLIANT FUTURE. By BUSHROD WASHINGTON JAMES, M. D., member of the Sons of the Revolution, Pennsylvania; Historical Society of Pennsylvania; American Academy of Political and Social Science; American Association for the Advancement of Science; American Public Health Association; Academy of the Natural Sciences, Philadelphia; the Franklin Institute; Historical and Ethnological Society, Sitka, Alaska, etc. Philadelphia: The Sunshine Publishing Company, 1897.

Our well-known friend and American-Institute-of-Homeopathy member has embodied in his present book a series of facts which, in the light of present events, are proving of great value to the American citizen. Dr. James spent some time in Alaska, and thus became personally familiar with its geography and topography, its history, its present, and its most probable future, and these he has embodied in one volume of nearly five hundred pages. To the prospective Klondiker, there is a mine of information in these pages; while to the lover of America, and withal the lover of the beautiful in nature, this book will prove a rare treat. There are, doubtless, many good Americans who, like ourself, have looked upon Alaska as a bit of grateful diplomacy—paying back Russia for her kindness to us during our War of the Rebellion; and stopping at that. But reading Dr. James' book, and examining his very excellent photographic views,—reproduced in half-tone engravings,—creates the belief that the United States made a very desirable acquisition in taking up this great northwest territory. It would seem from Dr. James' graphic narration that Alaska is capable of producing something besides seal furs and fishes. He details, in readable language, the gold and other metal discoveries; and, altogether, as in his former book,—“*Alaskana*,”—he discovers a new land of Evangeline. His book is embellished with a number of maps; and its pages are replete with information, both politically and sociologically, which hold the interest of the reader to the last. This book has been borrowed from our reception-room library no less than a dozen times since our first receipt of it, by persons becoming suddenly interested in its subject while waiting the arrival of the doctor. And it is uniformly admired, both for its diction and its truthful portrayal of new scenes and peoples. It is printed on heavy paper, handsomely bound, making a very attractive book for the center table. We congratulate Dr. James on his successful venture

into the realms of literature outside of the strictly professional.

SEX-WORSHIP: AN EXPOSITION OF THE PHALLIC ORIGIN OF RELIGION. By CLIFFORD HOWARD. Second edition. Washington, D. C.: Published by the author, 1898.

Sex-worship, as its name very clearly indicates, is based upon the early reverence for the genitalia of the race; the prehistoric peoples worshipping what to them seemed the most powerful influence in all the world—the act of procreation; with the instinct of primitive nature, as yet incapable of abstract ideas in relation to Deity, it symbolized its reverence by accepting the visible signs and idolizing them. The remarkable part of Mr. Howard's book consists not so much in his tracing this early phallic worship as a curious custom,—and he shows that it was based upon the highest moral grounds,—but as a direct forerunner of every religion of our present day. Thus, he essays to show that the cross, as the symbol of Life and Hope and Resurrection, was known and used in that relation thousands of years before the advent of Christianity; indeed, the early Christian Fathers forbade the use of the cross as a Christian symbol because of its well-known significance in the religions of the heathen nations. The birth of an Immaculate Being from a Virgin Mother, Mr. Howard shows, is a part of every one of the old religions; that it was known and believed in Mexico ages before the coming of Christ. He also traces this worship of the phallus and its congener organ into many of the present day symbols of and about the church: the steeple, the lights on the altar, the form of the Gothic windows, the doors, the altar, the rosary, the worship of the Virgin, the lamb, etc. It is truly a very interesting book, and a careful reading stirs up the depths of thought and makes one to marvel at the wonderfulness of ourselves and our surroundings, and to wonder still more at our future as a race, for if we of to-day, with all our vaunted knowledge, are the descendants of this peculiar phallus-worshipping people, then what may not the race accomplish in the illimitable æons of the future! The book is not costly. It is well-bound, and is couched in such language that our medical brother may read it with interest and profit.

ARSENAURO AND MERCAURO. Clinical Records as reported in Medical Journals. Charles Roome Parmele Co., 92 William Street, New York.

This is a book of thirty-two pages which includes a mass of testimony as to the value of arsenauero and mercauro, and the method of their use, taken from the prominent medical

journals of the United States, among them being the *New York Medical Journal*, *Medical World*, *Medical Standard*, *Journal of the American Medical Association*, *New England Medical Monthly*, *New York Polyclinic*, and others. Among the contributors of these articles are Prof. T. H. Stucky of Louisville, Ky., whose paper is well illustrated, showing the influence of arsenauo in increasing the number, size, and quality of the red blood corpuscles. Prof. Lydston of Chicago, Prof. Ohmann Dumesnil of St. Louis, Prof. Wight of Brooklyn; and others also contribute. The diseases which these clinicians have treated with the remedies are various and numerous, and the results which have accrued are often remarkable. Any reader may obtain a copy upon application by mentioning this journal.

SOUND VIEW HOSPITAL REPORTS.—Through the courtesy of Dr. T. J. Biggs, of Stamford, Conn., we have received some advance sheets from the reports of this institution, in which are detailed some very gratifying results from the use of Bovinine.

Globules.

Dr. William Lathrop Love, formerly at 409 Clason Avenue, has removed to 1188 Dean Street, Brooklyn.

The Denver College had a fine commencement service. The remarks by the Rev. Mr. Coburn were excellent and scholarly.

From Chicago to Omaha take the Chicago, Milwaukee & St. Paul Railway and travel over an accommodating road and with your best friends and companions.

Dr. George G. Shelton has some practical ideas in relation to the teaching of materia medica. They appear in full in the *New York State Homeopathic "Transactions"* and are worth reading with care and attention.

The Hahnemann Tomb Fund is before us. Everybody help a little. We want to move the mortal remains of our Grand Master from his borrowed grave to a handsome tomb in the Père Lachaise, Paris.

The Ohio State Society had one of the best sessions at Columbus that it has held for years. Peace-loving men were at the helm. Also lovers of the old-fashioned homeopathy.

The *Medical Era* was one of the very few homeopathic journals which accepted the Ripans Tabules advertisement. The *Hahnemannian Monthly* wouldn't touch it in any form or at any price. This journal ditto.

The *Ohio Journal of Homeopathy* is soliciting advertising contracts. This is the new monthly, to be edited and published by Dr. J. Richey Horner of Cleveland, beginning July 1.

At the École de Médecine the regulations restricting privileges have been rescinded, and the old order of things restored. Foreigners may now enter and matriculate as in the past.

At Green River, Wyo., a series of wells have been discovered yielding sixty thousand gallons daily of concentrated soda solution, from which one hundred thousand pounds of pure sal soda are daily crystallized.

Did you read that paper in the *Medical Century*, from the pen of Dr. F. H. Orme, ex-President of the American Institute of Homeopathy, on the pro side of vaccination? If you haven't, get a copy and read it.

Professor R. C. Copeland's eye-and-ear work at Ann Arbor is making for him and the university many friends. He is a good teacher as well as operator, two qualifications which do not necessarily inhere in the same man at all times.

Dr. Samuel A. Jones of Ann Arbor has two sons in the Michigan National Guard and both have been called out, and, of course, promptly responded. There is no "Thirteenth-Regiment" stuff in any descendant of Sam Jones of Ann Arbor.

The *Medical Counselor* has taken on new life and vigor. It has always been a bright and newsy journal since its rehabilitation by Dr. Knight; but recent additions to the staff have very signally added to the value of the journal. It is fearless and plain-spoken.

"I have not failed once for many years," says Professor Parvin, "by putting a blister over the fourth and fifth dorsal vertebræ, to put an end at once to sickness of pregnancy during the whole remaining period of gestation, no matter at what stage of the case I was consulted."

That *Critique* excursion from Omaha to Denver, and then swinging round the circle till the excursionists once more touch Omaha, is growing apace. Don't fail to send in your application at once. The Denver *Critique* folks are in charge, which means Western hospitality in its fullest acceptance.

"Abuse of Medical Charity in Boston" has been the subject of renewed discussion, both on the part of hospital physicians and those engaged in private practice. That there is a certain abuse seems to be generally recognized by all disputants; the suggestion, however, of an adequate remedy remains as vague as heretofore.

The next time you look at the picture of the Czar of all the Russians note particularly how much he looks like our genial Ohio homeopath, Dr. T. T. Church of Salem, and treasurer of the State Society.

Dr. A. R. Wright, the estimable president of the American Institute of Homeopathy, who met with a driving accident a short time ago, has recovered, and is in good shape for the duties of his high office at Omaha.

A fine picture that, of the prince of Institute secretaries, President Dr. E. H. Porter, which appears as a frontispiece to the recently printed New York State Homeopathic Society's "Transactions." Sorry this picture is not also to be found in the American Institute "Transactions."

The New York Homeopathic Society's printed "Transactions," like those of its sister State Pennsylvania, are always welcome additions to the physician's library. They are filled from cover to cover with information that is valuable in that it is the latest résumé of professional action.

We are notified that it has been decided to have the formal opening of the Institute at Omaha on Thursday evening, June 23, instead of the following day. All trains from the East reach Omaha in the forenoon, which would make a forenoon session poorly attended, and make but one session possible for Friday—the evening being given over to an entertainment.

Mt. Moriah Lodge, A. F. & A. M., had a "Doctors' Night" on the 13th. Rose Hill will have one on the 23d. It is the intention of the W. M. to have the entire work of the third degree conferred by physicians. This will be a good opportunity to see what the medicos can do. We may not be able to compete with Mt. Moriah, as she had an undertaker, a grave-digger, and a coffin-maker for the three artists in the second section.—*Sprig of Acacia*.

From the *Homeopathic* (monthly) *Review* of London, this moment received, we note that Dr. Pemberton Dudley has also been elected a corresponding member of the British Homeopathic Society. When writing our most recent critique, "Two Excellent Appointments," we had no knowledge of Dr. Dudley's appointment, else we would have included him in our praises to the B. H. S. for its sensible appointments: for Dr. Dudley is another of the professional brethren who are worthy of any and every honor any society can confer. Dr. Dudley has been general secretary and president of the American Institute of Homeopathy, and has filled many other important posts in the profession. The honor, therefore, is most worthily bestowed.

Now Dr. Schenk of Vienna tries to make the laity and some of the profession believe that the having of sex at will is a matter of more or less sugar.

And that other celebrity, the woman without a stomach, continues to live on and on, a constant temptation to multitudes of other surgeons to go and likewise.

Dr. W. H. Hanchett, Bee Building, Omaha, is the proper officer to write to concerning space for exhibits at the American Institute of Homeopathy.

"**Melancholia and Its Treatment**," by C. Spencer Kinney, is the leading paper in the *State Hospitals' Bulletin* just received. It is a splendid paper and very properly leads in the *Bulletin*.

The Missouri Institute has just closed its annual meeting at St. Louis. Drs. Pratt and Crutcher were among the visitors. Both report good sessions and much enthusiasm for the Omaha meeting.

The "Transactions" of the Ohio State Homeopathic Society for the session of 1897 has reached us. It is a fine bit of printing, which presupposes an equally alert and indefatigable secretary, which he is.

On the night between the two sessions of the Homeopathic Society of Ohio at Columbus, Dr. J. Richey Horner of Cleveland gave a lecture on "Recent Advances in Neurological Studies," illustrated by means of a stereopticon.

The Nickel Plate is one of the enterprising railroads, with all the latest and best equipments, good time, and cheap rates, running from Buffalo to Chicago. It has close connections at Buffalo with the East and at Chicago for Omaha. Try them.

Dewey has been heard from. He was at Cleveland and from there went to Columbus, where he took part in the State Society meeting. He is the same friend and brother, notwithstanding his many recent honors, that he was when he acted as guide, philosopher, and friend to the Immortal Seven who went to Hahnemann's tomb in 1896.

Don't fail to arrange for hotel accommodations at Omaha in advance of your going there. Remember this will be Exposition time and rooms may be scarce. Write to Manager Sillo-way of the New Murray.

WIT AND WISDOM (a new department) see page X.

The American Homeopathist.

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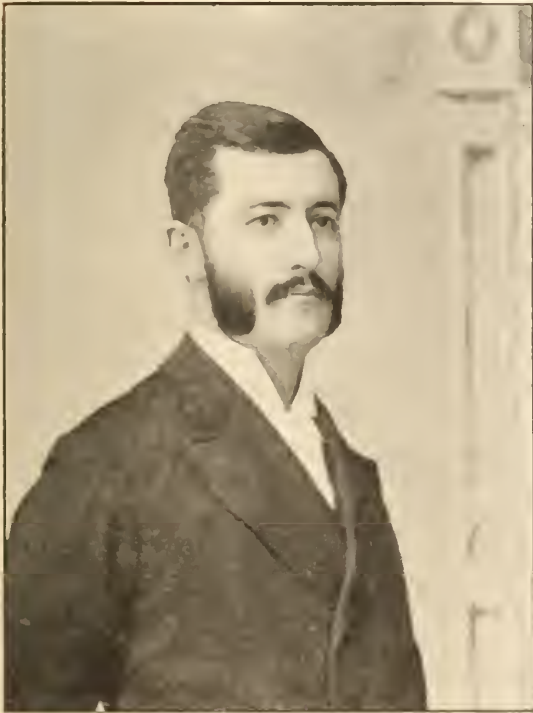
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The American Homeopathist.

NEW YORK, JUNE 1, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



CHAS. E. JARVIS, M. D.,
London, Ont.

ETHICS: EDITORIAL AND OTHERWISE.

IN a recent issue of one of our best homeopathic exchanges we note a paper on how to successfully examine a patient for a homeopathic prescription, giving an outline picture of a man's figure, in several attitudes, with convenient reference letters and dotted lines calling attention to certain parts and points about the body. The author calls this "Treatment of Patients by Correspondence," and, beyond a doubt, at

first blush at least, seems disposed to add to the sum of human knowledge in order to be passed down to aftercoming generations as a benefactor of his race. But, alas! the author has had the idea "Copyrighted, 1897"! And that ends its usefulness.

Inherently there seems to be no wrong in a medical man patenting the favorite child of his brain, just as any other craftsman would patent his newest ball-bearing rat-trap or latest butter-churn or double-levered collar-button; but it does seem to the medical profession, which has for centuries lived and thrived under the same as an unwritten law, that to patent any discovery, the general use of which would enhance the health of man and prolong his days in comfort and content, is unprofessional and unethical. We need only refer to the infamous instance of Chamberlain and his obstetrical forceps, where the discovery was kept from the profession and for equally as unworthy a purpose as if it had been patented in our present, progressive, bugteriological age. A man who engages in the practice of medicine, or continues therein, solely to make money ought not to have a place in it. He has not properly understood its aim and scope. He ought to have put his alleged brains to work in some other legitimate employment where he could, with much grace and more success, have competed with the other commercial and yard-stick hucksters. Medicine is the occupation of gentlemen.

* * *

ONE other feature of the offense, which strikes us as extra peculiar, is that this contemporary journal should lend itself to the exploiting of such clearly pitiful, debasing, if not wholly unethical, measure. Perhaps the article descriptive of the copyrighted plan was, in truth, like Tal-

mage's Saturday morning picture and praise-letter to Greene's Nervura, simply a paid-for advertisement: even so, its introduction as an Original Article does not place that editor under any less suspicion than before. He may, indeed, claim the "baby" act, as the various journals of the school seem now to do, who have been printing and publishing Original Articles on timely topics from an Indiana practitioner, but which invariably had a footnote directing attention to the latest book written by the contributor of the footnoted article, published at thus and so many sesteriæ by a now bankrupt book firm—not a homeopathic firm by any means—in Chicago. But even that excuse will not avail the wide-awake editor. He shouldn't be caught by such flimsy and clumsy advertising scheme.

* * *

TO conclude: First, the professional gentleman, speaking now of the medical gentleman, is a gentleman, and will not stoop to patent his brains to the detriment of the race, or if he is moved so to do by ungovernable impulse, then he will withdraw from that profession and then and thereafter make money. Second, the medical editor should not lend himself to the furtherance of any such clearly lawful commercial proceeding, but which is as clearly unethical and unprofessional conduct.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West
Eighty-fifth Street, New York.

References in this department are made by number.
See issue of January 1, or December 15, of each year.

Clinical Confirmations.

Hypericum IN TRAUMATIC NEURALGIA.—Dr. Von der Suhe.²⁰—A gentleman, while gunning in the neighborhood of Cooperstown of this State, was accidentally shot in the forearm of his left arm by a friend. The forearm was filled with a great number of bird-shot. He came home to Brooklyn and called on a surgeon, who treated him and removed all the shot he could, locating a number of them by the use of the X-rays. He suffered intense pain in the forearm and hand supplied by ulnar nerve.

There was partial paralysis of hand. Outward applications were used, which gave him temporary relief for a few hours a day. Electricity was persistently used, but had no effect on pain or numbness of hand. There is no doubt the ulnar nerve was lacerated. After nine months he came under my treatment. Gave him hypericum, which gradually relieved him, and in three weeks was entirely cured of the traumatic neuralgia. Then gave him lachesis 30 on disks to take four times a day for the numbness. At the end of a week reported improvement. Then I gave him seven powders of lachesis 200. Each powder to be dissolved in two tablespoonfuls of water; to be taken in two doses night and morning. This was two weeks ago. Last week took no medicine. The improvement in his hand has been remarkable. The numbness has nearly passed away from his hand. He could separate his fingers so that the tips of the fingers of his left hand could touch the tips of the fingers of his right hand, when separated. As long as there is improvement he will receive only placebos. His hand improved so much he went away for a few days on a hunting trip. He was able to use his gun.

Epiphegus 30 IN HEADACHE.—Dr. A. Von der Suhe³⁰ cured the following cases: "Nearly eight years ago I was called to a young lady, who was suffering from a headache that was located in the occipital region. The pain extended from there over the top of the head toward the frontal region, the severest pain existing in the occipital region. These headaches would always come on after the excitement of shopping all day or after going to evening company. She would be compelled to go to bed, it made her very nervous, only slept part of the night, and that restless. Had very little appetite, and was accompanied by great nervous prostration. Gave above remedy and the headache was better after a few doses. The headache disappeared entirely in a few days. The prostration remaining was entirely relieved by china m.^o. It was a complete cure, for she never suffered the same way. The second case was a young school teacher. For several months she would have a frontal headache, pains extending into the eyes; this was during the school session. After school the headache

would gradually pass away. This would occur every school-day. Gave her epiphegus 30 four times daily for a week. She has had no more headaches, and it is now over two months ago. The keynote of this remedy is this: headache brought on by a mental strain, whether shopping, visiting, or any other mental exertion, as teaching."

Selenium IN IMPOTENCY.—Dr. H. V. Halbert³ considers selenium effectual more upon the mental phase of the disease than upon the cord incontinence. It is applicable where lack of confidence is a factor; the condition due to a loss of brain control over the lower cord center. The resulting excesses produce debility and still further weaken the brain cells' power to give motor directions to the cord. The symptoms most prominent are forgetfulness in business, indolent and unreliable attention, insomnia, and finally mental inability, stammering and imperfect articulation. A further result is constipation, urinary incontinence, and impotence.

Mr. F., a young man of apparent good character, presented himself at my clinic for the cure of a condition generally defined by the symptoms above. He had not practiced an unnatural lust, but admitted excesses in his earlier youth. His complaint was mostly of his mental incapacity, for his forgetfulness had increased so that he feared the loss of position. A prostatic discharge at stool had frightened him into the belief that it was a more vital loss, and, therefore, a drain upon his brain. The mental dullness he attributed to this, as is frequently the case. His face showed signs of emaciation though not of apprehension. He complained of exhaustion and a desire to sleep, particularly in the morning. Other signs of exhaustion were noticed by the cold, clammy sweat on the chest, axilla, and genital region. Selenium 3x was administered for several months, with occasional intermissions. The improvement is pronounced; the mental infirmity has disappeared and the physical defect has been corrected. He is strong and well, and, more than all, he is of value as a man.

Cimicifuga IN DELIRIUM OF TYPHOID FEVER.—Dr. M. A. Wesner²² reports this graphic case:

In January, 1894, I attended D. R., aged twenty-seven years, who was afflicted with

typhoid fever. Prior to this attack he was on a prolonged spree, which he kept up three or four weeks, so that the fever was simply a transition from a continued debauch to the dreamy state incidental to this disease. It was a tumultuous case. He had delirium wild and sometimes determined, from the beginning. His temperature was 100°; had diarrhea, retention of urine, and many other untoward symptoms. At the end of four weeks he began to improve, although extremely emaciated. All the typhoid symptoms disappeared,—fever and all,—with the exception of the dry tongue, subsultus, and delirium with that extreme restlessness and constant wakefulness. For four days and nights he did not sleep five minutes at a time and that very seldom. He kept constantly talking and continually changing the subject, now of this, then of that, and again of something else. While lying on his back he would fall asleep, then raise his hand slowly and by the time it reached arm's length he was awake. This he repeated at least a hundred times with always the same result, and he never slept any longer.

After having a consultation in his case, and trying a number of remedies without apparent effect, on the fifth day after the fever left him my patient was given cimicifuga 6x in water, one dose every hour, with the most happy result. He took just three doses and then fell into a sound sleep which continued uninterruptedly not less than four hours to begin with, at the end of which time he awakened, got another dose of his medicine and slept again. His delirium soon began to grow milder and at the expiration of forty-eight hours, about three-fourths of which time he slept, it had entirely disappeared and he was perfectly rational. His tongue now became moist; in fact, all the various organs assumed their normal functions, and my patient went on to rapid recovery—all owing to the use of cimicifuga.

Ignatia AS AN EYE REMEDY.—Dr. Thorn^{9 29} secured good results in the case of a woman who had suffered from sore eyes for about ten weeks. The allopathic treatment with atropin and eye-lotions has been altogether ineffectual. The patient is in despair. There is so great a sensitiveness to light and so severe a spasm of the lids that it is absolutely impossible to exam-

ine the eyes. Even the least ray of light is unbearable to the patient. Out of the closed eyes there issue at times sharp tears. Now and then certain muscles of the face twitch. There are fiery zigzags before the eyes. Since her eyes are sore the patient is also afflicted with noises in the ears, which she describes "like the chirping of grasshoppers." The patient cannot remain quiet in one position, even for a moment, while consulting me, but has continually to move her body hither and thither, which gives her some relief. She suffers from nervousness of a high degree, and in consequence of unfavorable family relations she has to bear much grief and sorrow, which she has to suppress. With especial regard to the mental state and the nervousness of the patient, I ordered *ignatia* 4, which has, indeed, a great number of symptoms referring to the eyes, but nevertheless belongs to the eye remedies which are rarely used. The success was surprising. Eight days after beginning the cure the patient, as she communicated to me in writing, was already able to take part in the preparation for Christmas.

Medical Memoranda.

Strychnine Poisoning.—Dr. A. Hubel³⁷ reports that two hours after intestinal ingestion of this drug he thoroughly washed out the stomach, gave strong coffee and ten drops of tincture of iodine every two hours. Later he administered seventy-five grains of potassium bromide. Recovery followed. The notable conditions, aside from the usual symptoms, were in this instance the elevation of temperature on the first day, the retention of urine, and the appearance of blood and casts in it. The first is explained by the enormous activity of the muscles; the urinary retention by the spasm of the sphincter vesicæ. The blood and casts can be explained by the irritation which strychnine in large doses produces in the kidney. During convalescence the influence of strychnine upon metabolism was marked in that the chlorides and phosphates were markedly diminished at the commencement, but increased daily in amount, while the urea remained constant as in normal urine.

Some Effects of Cannabis Indica in Large Dose.—D. Robert C. Bicknell³⁸ re-

gards as worthy of note the existence of muscular contractions, followed later by convulsive movements, evidently due to action of the drug on the spinal cord. Aside from acceleration of the pulse-rate and a feeling of fullness in the artery at the wrist, there was, just previous to the occurrence of unconsciousness, a sense of extreme tension in the abdominal blood vessels; they felt distended almost to bursting. After some hours the urine was markedly increased in quantity. No constipation resulted. There was no foreboding nor fear of impending death.

Partial Proving of Euonymus.¹⁵—The drug was prepared from the fresh wahoo root, dug in Washtenaw County, Michigan. The subject was a male, twenty-four years old, of nervous temperament, strictly temperate, did not use tea, coffee, tobacco, always ate plain food; healthy; had no idea of the nature of the drug he was taking; was required to report whenever anything that seemed a symptom developed. Began with a drop of the tincture, the dilution being changed from time to time until the fourth was given. Time of taking medicine, three weeks every two hours every day. Some of the most prominent symptoms were developed after discontinuing the drug. The notes are in the prover's own words: "Felt elegantly for about a week, then began to feel tired generally. Bowels a little lax. Have had to 'brace up' to keep a-going. Sleep not good. Restless first part of night, wake up early in morning. Pain over the liver. Pain in right lung. Was accused of being drunk on the street. Stomach feels 'off' with nausea and flatulence. Worse evenings. Headache over and around eyes. Heart has been sensitive. Palpitation when running up and down stairs. Did not go to sleep for two hours. Was restless, could not sleep. Have been so thick-headed for a week that could not study. Slow in getting senses together. Have to think and think to answer a simple question. Some days after stopping medicine thought liver was enlarged; had that sensation. Region of liver was tender." (Note by observer: One night came to house and called me up; he was alarmed because of the sensations just given. Was sure he had "some liver disease." This is significant, for the prover had had no suggestions as to

what symptoms he might experience or what the drug might be like in its action.) "Belched gas in small quantities with the flatulence not relieved. Was constipated for some time after the second day of stopping. Was not able to study for two week after stopping the medicine."

CHRONIC FIBROUS (INTERSTITIAL) NEPHRITIS.*

By CLIFFORD MITCHELL, M. D., Chicago.

THE opinion seems to be gaining ground nowadays that chronic fibrous nephritis is the result of a number of causes which may produce long-continued irritation of the kidneys. Among these, as you all know, are gout, malaria, syphilis, lead, and alcohol. The view of Senator that the genuine form of chronic fibrous nephritis is a persistent toxæmia, acting simultaneously as an irritant both to the blood vessels and to the kidneys, seems reasonable when we consider the clinical phenomena and *post-mortem* appearances.

May we not have cases in which no history of either gout, malaria, syphilis, lead, or alcohol is obtainable? Yes; and, moreover, frequently. In my own experience the causes mentioned above are not even common. The American business man in well-to-do circumstances—hard-working, alert, capable, conservative, and regular in his habits—is exceptionally, in my experience, a victim of either gout, malaria, syphilis, plumbism, or alcoholism. Nevertheless, he falls a victim to chronic fibrous nephritis.

Again, according to some authorities, chronic fibrous nephritis resembles tuberculosis in that it is rife in certain families. Here, again, I cannot agree, nor, in fact, recall any cases of this character.

What, then, is the ætiology of chronic fibrous nephritis among those whom the writer sees? Strange to say, the following :

1. Uncommonly good family history : parents and grandparents long-lived people.
2. Previous history of good health in the patient, who frequently has not missed a day from business in many years.

How, then, are we to account for the development of the lesion?

There is another way by which long-continued irritation of the kidneys may be accomplished. The late Dr. Fothergill, whose experience was evidently very like my own, believed that mal-assimilation of food was a leading cause of this lesion. Now, from what does this mal-assimilation of food result? From irregularity or excess in modes of living, especially in eating, drinking, working, and resting, which brings about prolonged elimination through the kidney of irritating products of defective digestion or disturbed tissue metamorphosis (R. H. Fitz). What do we mean by excess in modes of living? On the definition of excess rests the entire ætiological structure. The writer has been insisting for years that a broader definition of the words temperance and excess be made. At present the word temperate is applied to those who abstain from alcohol. It is quite possible, however, that a total abstainer from alcohol may be a most intemperate feeder. The words temperance and excess should, then, be considered purely in reference to the physique of the individual. A man is not temperate whose modes of life are such as result in a marked deviation from normal of the urinary ratios, namely, the ratio of urea to salts, of urea to phosphoric acid, and of urea to uric acid.

The patient, who complained bitterly to me that virtue had not met with its reward because he himself, temperate as regards alcohol and regular in habits, was an albuminuric at forty, while his brother, who had used whisky for a lifetime, was healthy at sixty, did not reflect that his own regular, hearty eating, regular abstinence from fresh air and from drinking of fresh water, and regular lack of exercise were, from a renal standpoint, quite as intemperate as his brother's whisky drinking.

A typical case of chronic fibrous nephritis from long-continued mal-assimilation of food as the only tangible cause is illustrated by the following: Patient, fifty-two years of age, of good family history, long-lived people on both sides (father alive at eighty), with previous history of good health, is reported by life-insurance examiner to have albumin in his urine and referred to me for treatment. I find the patient apparently in good health, but corpulent and affected

* Missouri Institute of Homeopathy, St. Louis, 1893.

for years with considerable wind on the stomach, as he expresses it. Examination of the urine shows about the normal quantity in twenty-four hours, with deficiency in phosphoric acid, ratio of urea to phosphoric acid 14 to 1, ratio of urea to uric acid 35 to 1. Albumin between four and five per cent. bulk by the ferrocyanic method; the indican reaction is marked. The urinary sediment contains hyaline casts, a few yellow granular casts, and those epithelia which we are in the habit of referring to the convoluted tubules for origin, namely, small round epithelia with distinct nuclei one-third larger than the pus corpuscles in the same field. Pus corpuscles and occasional blood corpuscles are present, also epithelia from the middle layers of the bladder in small quantity. Diagnosis, slight chronic fibrous nephritis with slight acute recurrence and slight catarrhal cystitis.

In view of the good family history, good general health, and previous history of the patient the ætiology became a matter of interest. Patient is "temperate," as he calls it, in every way, but admits having led a sedentary life for twenty or thirty years, during which time he has eaten heartily of meat, eggs, and sweets! Result: corpulence, "wind on the stomach," auto-intoxication, chronic fibrous nephritis incipient.

The combination of meat, eggs, and sweets struck me as a particularly vicious one, and in regulation of the diet sweets were prohibited altogether and the amount of meat cut down to one-third; systematic, gentle exercise in the open air, with regular drinking of water advised; attention to the skin by means of baths and rubbing enjoined, and merc. cor. and cantharis in the third decimals prescribed for the present condition of the kidneys.

In the long run, in such cases you are, however, likely to need remedies which affect the digestion favorably rather than drugs supposed to have specific effect on the kidneys.

The case mentioned above was in the earliest stages; in fact, we are perhaps jumping at conclusions in making the diagnosis at all when the usual circulatory symptoms are absent. But from our knowledge of the insidious and erratic character of the lesion, from the fact that con-

tracting kidney is known to have been found *post-mortem* in persons killed by accidents when in what was apparently full mental and physical vigor; and from our inability to trace the condition of the urine to any other cause, the diagnosis seems warranted.

In regard to the cases further advanced in whom marked symptoms have appeared, I have a therapeutic note which may interest you. A frequent symptom is a throbbing or, as some express it, a "thumping" in the occipital region, doubtless referable to circulatory disturbances of some sort. This is generally accompanied by frequency of urination at night. The throbbing yields beautifully to aconite (5-drop doses of the second decimal dilution), with care advised about physical over-exertion. In these cases there is an intimate relation between physical over-exertion and the throbbing. Thus one patient could play golf without ill effect, but rowing in a boat brought on the unpleasant symptom at once.

In other cases the circulatory disturbance is more clearly one of high tension, as follows: Patient, male, forty-six years old. Has albumin and casts in small quantity in the urine, with previous history of good health, etc. Has what he calls a "wavy" feeling in the head all the time, and is subject to attacks, when, as he says, he can hear the blood rush to the head, after which he is dizzy and almost blind, but conscious. There is pressure in the head, in the vertex, occiput, and temporal region. When he reads he sees sparks. This patient was put on aconite 1x dil. and glonoine 3x. Between December 31 and April 6 he has not had even one attack of dizziness. The number of casts in the urine has decreased to a marked degree. The small amount of albumin persists. The urinary solids are about the same.

I mention these two cases in order to give prominence to the use of aconite. While we use aconite in acute post-scarlatinal cases we have not, as a rule, thought of it in chronic cases.

It is a remedy which we cannot afford to forget at any time of day, or in any given case, and the old, old adage, "When tempted to bleed, give aconite," is just as true to-day as it ever was, and for the same reasons.

Pil. No. 50.**Massachusetts Homeopathic Hospital:**

(From the President's Report, December 31, 1897.)

The increase of the property of the hospital, and the consequent development of its activities, which is likely to be continuous and progressive, have constrained the trustees to consider the subject of changes in methods of administration to meet new responsibilities. They have arrived at the conclusion that the immediate care and management of the institution should be intrusted to an officer to be called "The Director of the Massachusetts Homeopathic Hospital," with large powers and duties, involving serious responsibility. They have desired to place in the position a man of acknowledged professional distinction and of large general experience. It will not surprise those who have any knowledge of the history of the hospital that the choice of the trustees has fallen upon Dr. I. Tisdale Talbot, who has been unanimously elected director of the hospital.

To the well-deserved reputation and to the high attainments of Dr. Talbot as a physician, he adds a qualification for the position which is peculiarly his own. From the early and feeble beginnings of the hospital to the present day no man has given more time, thought, and unsparing energy to its support and success, and now that it has reached an honorable distinction as a charitable corporation, and that new fields of usefulness are opening before it, it may well and fitly be intrusted to the sympathetic care and oversight of one to whom it has been for so many years an absorbing interest.

The trustees express the feeling of all the friends of the Massachusetts Homeopathic Hospital in wishing for Dr. Talbot a long and successful career as its director.

[So say we all of us!—ED.]

Atlantic Medical Weekly:

Aside from the duty which a hospital owes the State, to encourage thrift and discourage indiscriminate charity by the admission of only the deserving poor for gratuitous treatment, it owes a large debt to the profession, from whose willing service there arises the possibility of existence, and in no case can it enter into

competition with the medical profession without a serious disturbance of the relations existing between them.

While it may be entirely proper to charge such as are able to pay a moderate price for board, to cover the expense of the maintenance of the ward, it is not proper to make a profit from them.

The private room at fifteen to thirty dollars per week should have no place in the purely charitable hospital, and for the same reason, the patient who desires to enter the institution simply because it is cheaper should not be allowed to do so; and we believe that the hospital which recognizes this fact and asserts a recognition of the value of the services of the attending physician, by refusing to compete with him, is taking the right step toward a settlement of the many difficulties of the dispensary abuse.

—*Editorial.*

New England Medical Monthly:

Why should ministers pay us? None but the regenerate would venture to suggest a fee. If there are any reasons for such an unusual procedure, they have not yet been presented by the minister, and in the meantime the doctor continues to care for those whom he helps to support. Were we ever solicited for contributions for religious purposes or even allowed to pay full rates for pew rents, we might venture to charge the minister a little something, but how can we, when he favors us in so many ways and asks nothing of us but our professional services—and whatever else seems needful?

HOMEOPATHY IN THE ARMY AND NAVY.

DETERMINED efforts are being made in several directions of the United States to bring about the abrogation of that old-school dogma that no one can become an Army or a Navy surgeon who is not a graduate of the allopathic school. This is fortunately a good time to strike for our liberties, while our army and navy is striking for Cuba Libre. From the West we hear that Dr. B. F. Bailey of Lincoln, Neb., in association with the Governor of that State, has succeeded in interesting United States Senator Allen, who introduced the following bill:

THE CONGRESS, S. R. 164.
1ST D. SESSION.

IN THE SENATE OF THE UNITED STATES.

MAY 9, 1898.

MR. ALLEN introduced the following joint resolution, which was read twice and referred to the Committee on Public Health and National Quarantine.

JOINT RESOLUTION

Preventing discrimination against graduates of legally chartered medical colleges in appointments to the medical corps in the Army, Navy, and Marine-Hospital Service of the United States.

Resolved by the Senate and House of Representatives of the United States of America in Congress assembled, That graduates in good standing of any medical college regularly chartered under the laws of any State of the United States, and eligible to practice therein under the laws of such State, shall, on application, be entitled to examination for appointment in the medical corps of the Army, Navy, and Marine-Hospital Service of the United States, any statute or departmental rule or regulation to the contrary notwithstanding.

From our Washington correspondent we learn that Dr. C. E. Fisher, with Senator Cullom of Illinois, called on the President and presented the cause of homeopathy with reference to the Army and Navy service. The President responded that he had thought the old prejudice was worn away, but upon being assured that such was not the case advised that the matter be presented to Secretary Alger. This was done. General Alger at once said that it had been wholly overlooked, and that he would take it up immediately. He directed his secretary to make a note as follows :

"In the appointment of surgeons and assistant surgeons for the Army and Navy and marine-hospital service in the future the homeopathic profession must be recognized."

That has the ring of the pure metal ! If only our brethren near the throne will keep the matter warm, something may come of it. There was certainly never a better period than the present for enforcing our claims. Gen. Alger admitted our right to be as patriotic as anyone, and that we are justified in not wishing to be disfranchised from service at this time. His statement to Dr. Fisher was brief and emphatic and sufficiently positive to satisfy anyone. The order will go to the medical department, and then ? Well, we shall see. But it also shows

that it required someone to see the proper officials in Washington who could put sufficient life into an interview to bring about a favorable result. This was done by Dr. Fisher in company with Senator Cullom. Having had this satisfactory interview with the President and the Secretary of War, Dr. Fisher then called on Dr. MacDonald at the hospital (where he was doing a double ovariectomy and appendectomy, surrounded by the Washington profession), and reported his effort, which was received with much pleasure by all. Let us keep the ball rolling !

THAT "RADICAL" LETTER.

THIS editor distinctly declares that he did not write that letter. His only part was in the comment appended. His long course in free-speaking and clear-writing should ere this have convinced his readers that when he has anything to say he says it without the use of the pen name. Is not this so ? Not another journal in our school has spoken out as sharply as the AMERICAN HOMEOPATHIST. So that the imputation to us of authorship of an anonymous letter appearing in our own pages smacks of cowardice. While we have been accused of almost every crime in the catalogue or decalogue, editorial cowardice is not among them.

This is not to be construed as a plea for the "baby-act." We have been behind an editorial pen long enough to know the responsibility which attaches to the editor who permits the appearance in his pages of an anonymous communication. But this we want to say: namely, that the "Radical" letter appearing at this time was a sad mistake. When it was written, shortly after the closing of the Buffalo meeting, while both parties to the presidential contest were still warm with the work done there, with the facts new and fresh, the letter seemed *apropos*. But after the lapse of months its newness and appropriateness were gone. It should not have been printed.

This editor has suffered a number of times by reason of the distance between him and his printing house, and his consequent inability to see "proof," "revise," or "make-up." This "Radical" letter, finding its way into the publishers' office at New York, and later into the

printers' hands, was long lost sight of; then it suddenly appeared in print when the subject of which it treated was no longer a matter of news. Thus the "Radical" letter found its way into the AMERICAN HOMEOPATHIST months after its writing. We feel sure the author of the letter would no more care to write it for publication to-day than this editor would permit its publication.

MASSACHUSETTS HOMEOPATHIC HOSPITAL.

THE twenty-eighth annual report of this noble institution lies upon our desk. It shows that the hospital is in a flourishing condition and worthy of its name and patrons. It has had a good year and been the means of doing great good to the many hundreds who sought its aid in one way or another. Its rate of mortality is as usual most excellent, and keeps the homeopathic treatment still in the front rank for success. We regret to learn officially, what we have known for some time privately, that our "old" friend, Dr. T. M. Strong, for six years the resident physician, has resigned and gone back (not backward, by any means) into his specialty practice. But we also mark with pleasure the official announcement of the appointment of our "young" friend, Dr. I. Tisdale Talbot for director of the hospital. It gives us pleasure to publish, in another part of this journal, the tribute of the president of the hospital to the value and reputation of Dr. Talbot.

A CLEVELAND HOSPITAL.

WE have had occasion latterly to visit the Huron Street Hospital, and were much pleased with the many improvements manifested. The superintendent, Mr. Webber, was met and interviewed in his office, giving a good *résumé* of the year's work. Ending February 1, 1898, there were admitted 1020 patients for the year, 49 remaining from the previous year. Of these 871 were cured, 80 were improved, 3 did not improve, and 64 died. This work was divided into surgical cases, 796; medical, 240, and obstetrical, 33. Two other items of interest are worthy of chronicling, namely, that 24 of the 64 who died were moribund; and that about half of the patients were No Pay! Showing at a glance

that this hospital is doing good work, both in its percentage of mortality, as well as in its charitable features. Although a homeopathic hospital, surgeons of other schools do not hesitate to operate here, and bring their patients. There must be a reason for this. That reason consists in the very systematic way in which this hospital is handled by its efficient officers and superintendent. It also means that the services of its corps of surgeons and physicians, which are given gratuitously, are first-class and worthy of the good cause for which they are bestowed.

Correspondence.

AMERICAN HOMEOPATHIST :

Please to correct in your next issue an error of some importance in my article on *Fucus Vesiculosus*. It occurs on p. 140, May number, second column, sixteenth line from the top, first word in the line. You print it "third" extract. It ought to read "fluid" extract. Many of our readers might think it was meant for *third dilution* or trituration. The *fluid extract* was the preparation I always used.

It is important, therefore, that the correction be made quite prominent in your next issue, as you will at once discern.

Yours fraternally,

R. N. FOSTER.

553 Jackson Boulevard,
CHICAGO, May 9, 1898.

AMERICAN HOMEOPATHIST :

Nowhere are there to be found more patriotic and loyal men than are found in the homeopathic ranks. As a natural result of this condition, when President McKinley issued his call for volunteers there were numbers of good men, graduates of homeopathic colleges and successful workers in our ranks, who saw fit to offer their services. It shortly came to my notice that the Governor of at least one State desired to make some appointments from our school but for the knowledge that they would not be accepted by the Surgeon General of the United States. Inasmuch as the Surgeon General has always held when importuned by us that no discrimination was practiced, this was to my mind

sufficient reason for an indignant remonstrance. That we might be positive as to the status of affairs before taking action in the matter, I sent the following telegram :

LINCOLN, NEB., May 3, 1898.

J. B. Gregg Custis, M. D.,
110 East Capitol St., Washington, D. C.

Wire Surgeon General's decision relating to appointment Homeopaths in army.

I received the following reply :

WASHINGTON, D. C., May 3, 1898.

B. F. Bailey, M. D.,
Lincoln, Neb.

Theoretically Homeopaths eligible. Practically debarred. Last one rejected because had not had yellow fever.

J. B. GREGG CUSTIS.

In reply I immediately sent the following telegram to Dr. Custis :

May 4, 1898.

J. B. Gregg Custis, M. D.,
110 East Capitol St., Washington, D. C.

Request Senator Allen of Nebraska to introduce resolution forbidding discrimination against any school of medicine in appointments to Army or Navy, and attaching penalty clause.

(Signed) BENJ. F. BAILEY,
President Nebraska State Board of Health.

I endorse this request.

SILAS A. HOLCOMB, Governor.

Senator Allen has complied with this request, and introduced this resolution ; and, inasmuch as it seems that we cannot expect justice from the spirit of the law, but must demand it by the letter of the law, it behooves us to see to it that we take strong and rapid advantage of this opportunity and place upon the statute books of the country a law which shall recognize us in fact as well as in spirit. To this end I ask that you bring this subject before your readers, that they may promptly memorialize, and bring such influence to bear upon the senators and members of the House from their respective States as will insure their vote in behalf of this resolution. Refer to above resolution as Senate File 164.

Fraternally yours,

BENJ. F. BAILEY.

LINCOLN, NEB., May 10, 1898.

THE INSTITUTE'S PUBLICATION COMMITTEE.

IN our remarks concerning the emasculation of the American Institute Transactions, we had no intention and have none now of impugning the work of the publication committee. As the recording secretary for several sessions, and one of the stenographers for several years preceding that, we know that the publication committee and the recording secretary are held responsible for what is changed, frequently in full, by the members or in the special committee reports when the speech or discussion reaches them for revision. Instead of the discussion, which occupied twenty or thirty lines in the transcript on reaching the discussor for revision, returning in something like that same number of lines, it more often returns as a stump speech.

It has happened within the knowledge of the present recording secretary that a discussion has been completely negated by the withdrawal of the original remarks or their utter change as originally delivered. Thus, in one instance, an essayist spoke of a certain well-known children's disease. The speakers following demonstrated that the reader was wrong in the diagnosis and treatment. Now, when these speeches were transcribed by the stenographer and sent piecemeal to the several speakers, no one seeing the other speeches, and then returned to the recording secretary, the essayist had completely changed the original idea, in order to make it conform to the later discussion ; while the individual critics having returned their remarks but little changed, found upon looking at the printed Transactions that they had, according to the printed version, been talking about something that did not appear in the paper ! In short, that they either didn't know what they had been talking about, or else the stenographer was incompetent and had not caught the words of the essayist. How could the recording secretary make the proper explanation ?

So long as the membership is permitted to revise its speeches there will always be the danger of a complete change from what was delivered in the debate ; and therefore the transactions are not what they purport to be. If this custom is to be persisted in, the employment of shorthand reporters for the sections is a needless expenditure. The same duty could be much more effectively done, and without any expense whatever, by asking the secretary of the section to keep "tab" on the speakers, and as soon after the section is closed as possible request the several speakers to transcribe what they had said or had intended to say—for it amounts to that in the end. If, however, the stenographic idea is to dominate, then let the Institute empower its proper officer to employ

professional stenographers (*medical* stenographers), as the American Medical Association does, pay them a professional price, the notes so taken not to be submitted to the speakers for revision, but sent at once to the printing committee. This would relieve the several officials of the Institute of the suspicion of having changed the record for unworthy motives.

THE OHIO MEETING.

AFTER two days of fine work the Society adjourned, peace and harmony prevailing. All fears to the contrary were dissipated by the even-paced tread of events under the skillful marshaling of President Geohegan. The weather has been fairly good. The hotel accommodations were of the best as were also the facilities for holding the meetings. Everything under one roof. The seventh story of the Great Southern Hotel—a hollow square—being given over to the convention and the exhibitors.

The programme, if I may so say, was an enthusiastic one. On the first day we had sanitary science and gynecology; while in the evening Dr. J. Richey Horner of Cleveland gave a stereopticon exhibition of the recent advances in neurology. The election of officers was held before the afternoon adjournment and resulted in the ever-faithful and efficient secretary, Dr. R. B. Carter of Akron, being elected president; Drs. A. W. Reddish of Sidney and Martha A. Canfield of Cleveland, vice presidents; Drs. A. B. Nelles of Columbus and Grant of Springfield, secretaries; Dr. T. T. Church of Salem was re-elected treasurer, and Dr. D. H. Beckwith of Cleveland re-elected as necrologist. After the neurological exhibit by Dr. Horner I am informed that a reception was given by the Columbus Homeopathic Medical Society in the ordinary of the hotel.

The second day opened tardily with routine business, and eventually passed into the materia medica bureau under the chairmanship of Dr. Reddish. After this it was found necessary to curtail the reading of papers in order to have even a few moments for each title yet on the programme; so that obstetrics—"the bureau of our nativity," as jolly Dr. Hart christened it—read but one paper in full: that of its chairman, Dr. Means of Troy; but this was a good one and elicited some valuable discussion. The society will meet next year in Springfield, where Dr. R. B. House will have, if not a "full house," then certainly an open one. The jubilee of Hahnemann College of Philadelphia has taken some of our best members, notably Dr. C. E. Walton, whose absence was marked at every point. At the conclusion of the first day a number of participants were obliged to leave for the same

jubilee, as I was informed, and among these was Dr. J. C. Wood of Cleveland; and this morning others have disappeared, Dr. Horner being among the number.

In the absence of the proper official, Dr. D. H. Beckwith was called on to speak in response to the address of welcome of Mayor Black and acquitted him well. It was a splendid and able effort, remembering that it was wholly impromptu. His reminiscences of the organization of the first homeopathic society of Ohio in the early fifties was an interesting bit of history, and listened to with attention. This early society was ultimately succeeded by the present State Society, and Dr. Beckwith was again present at its birthing, as he has been at most of its annual meetings.

Dr. Beckwith, as necrologist, paid a most eloquent tribute to the life and memory of Dr. William Owens. It was most feelingly delivered, and as the eulogy proceeded the audience became hushed and attentive. It was one of the beautiful papers of the meetings.

The Board of Censors were "perniciously" active in that they let no "guilty" man escape becoming a full-fledged member. Dr. M. P. Hunt "nailed" every man, or one woman, who was in evidence in the meeting or the corridors, without the blue badge of the society. All told, I think there were twenty-five new members elected.

The peace was a "leettle twisted" on reading the auditing committee's report. Here it transpired that Dr. Clemmer, a most worthy member, had objected to the payment of an assessment levied for the payment of expenses in legislative work. Some remarks made pending the adoption of the report offended Dr. Clemmer, who sent in his resignation. But, as I said, the society was (almost) a peace-at-any-price association, and could not brook the thought that any brother of the society should have been hurt. It promptly appointed a committee who as promptly reported that was all again peace. And so the society stood to its closing moment. It seems to me to have been an oversight to read Dr. Clemmer's private letter to an audience. A private letter has rights, even if it be not marked or stamped "personal" on each page.

Some events of the past few months have caused the president, Dr. Geohegan, and the secretary, Dr. Carter, to discover that the constitution and by-laws, under which the society was presumably working, were exceedingly loop-hole, and recommendations were, therefore, embodied in the president's address looking to the tightening up of the "slack." Under this order, therefore, the constitution and by-laws were mended and amended; the chief of these changes having relation to the election of the officers, the appointing of the legislative com-

mitte, the inter-State committee, the publication committee, and the employment of an official stenographer. The election-clause, being in the nature of a change in the constitution must lie over one year; this change consists in adopting the American Institute method—a modified form of the Australian ballot. Thus, hereafter (if adopted), the element of politics will be much less in evidence than in former years; there will be more time to give to the scientific part of the meeting; and, as one doctor said, there will be more certainty of getting candidates from different elements of the society. When a man, or woman, is nominated in open meeting it is exceedingly embarrassing for someone else to be nominated for the same position. It will, as it usually does, cause friction.

A committee was also recommended to arrange for the detail and routine work of the society, thus again adding many hours to the scientific business of the society.

The official stenographer question had become of such importance in this society, by reason of two or three years of incompetency, inability to read his notes, or to get them out within a reasonable period of time, that it was made a principal business to have this corrected. I may speak with some assurance on this point, because I have sat in this chair a number of times; and, also, because I spent several years of my earlier life as a shorthand reporter. Very few doctors know that a man who can take dictation in an office, or even report ordinary law cases, is by no means a medical stenographer. In some of the larger cities so well is this become known that stenographers are classing themselves, as do the lawyers, as specialists in certain lines; and of all these various classes the medical stenographer ranks highest. No matter how many hundred words a man can write per minute in ordinary work, he cannot write what he does not understand. And a man who can follow understandingly a discussion filled with the technicalities of medicine, is almost a doctor, and will not long continue a stenographer. At the risk of introducing myself unnecessarily into my narrative, I will say that that was how I came to study medicine, although I had been reading law for nearly two years.

The president's address was a scholarly effort and well delivered. It took large views of the universality of homeopathy, and pointed out in masterly fashion the advantages reaped; and how, also, the other school was paying us the delicate compliment of imitating our methods and stealing our means. The rulings of the chair were clear-cut and eminently proper and just. I heard of no complaint from anyone,

and I "snooped" around a good deal, except that there was an embarrassment of riches—more papers than could be handled.

Dr. H. F. Biggar was with us during the first day and took part in the discussion of several of the papers. His thoughtful resolution of thanks to the retiring secretary, Dr. R. B. Carter, was a happy one, and promptly and unanimously adopted.

Dr. W. B. Hinsdale and Dr. W. A. Dewey (not of Manila) of Ann Arbor were present; so also was Dr. M. H. Parmalee of Toledo. And each of these notables took part in the work. Dr. Dewey referred to the medicine his namesake and distant relative had administered to the fleet at Manila,—namely, cantharides: "Spanish fly,"—and brought down the house. Dr. Parmalee goes abroad within a month or two, to get more light, as Dr. Hinsdale basely insinuates, on the Virtues of a Fallopiian Tampon. Dr. Dewey's "Essentials," Dr. Richard Hughes informs him, will be, or has been, in process of translation into Portuguese, with an introduction by Dr. Hughes.

The materia medica bureau, as the president stated at its conclusion, was the best of many past sessions. It was well attended, and the discussions elicited many facts which were jotted down in many *Mellin's Food* books in the audience. Dr. Miller of Springfield—with his R p Van Winkle voice—electrified the audience with an infallible gall-stone specific; so that he was soon surrounded by an admiring coterie of would-be gall-stone colic curers, asking for the formula which he had mentioned. It was Rade-macher's turpentine and Hoffman's anodyne, alternated weekly with *carduus marianus*. (*Eranthe crocata*, in the hands of Dr. Dewey, had done wonders in epilepsy. *Ecchinacea* was Dr. J. C. Fahnestock's contribution. He opened by placing sixteen one-ounce specimens procured from as many pharmacies. After showing how they varied in color and sediment he stated that he had had his best results from the root, or the whole plant; that that grown in Nebraska is more active than that from Tennessee. He found it good in neuralgia of the face and in other parts. *Natrum phos.*, by Dr. Reddish, turned the discussion in a gall-stone colic direction, whence it appeared that this is the specific of the old school.

In the bureau of gynecology some excellent papers were read and discussed: Principally that of Dr. J. C. Wood on "Further Experience with the Normal Saline Solution in the Treatment of Sepsis and Uræmia." The cases reported by Dr. Wood were those in many instances moribund and almost dead. His saline solution is approximately a heaping teaspoonful of chloride of sodium to a quart of hot water, injected

through an aspirating needle into any part of the body rich in cellular tissue. It is also given by the bowel before releasing an operated-upon patient from the Trendelenburg position. The discussion developed the fact that even when taken by the stomach it is good. Dr. Wood's paper was intrinsically fine, and his answers to questions and criticisms showed him master of his subject.

Dr. Katherine Kurt's protest against curettage was timely and apropos, after having listened for the best part of half an hour to the manner adopted by some of the discussers in doing the cue-ray-tache. This protest followed aptly on Dr. O. A. Palmer's recital of his failures.

Dr. H. E. Beebe's "Medical Gynecology" gave twenty remedies most used in gynecology. It was "refreshing," as Dr. G. W. Spencer said, to learn that there is a gynecology which does not imply cutting and ablating and extirpating. Indeed, this paper started a wave of *materia medica* which threatened to prolong the session of the bureau until late into the stereopticon lecture. But it was a wholesome draught, and it was given by Dr. Beebe in his usual forceful, satisfactory way. The indications for the twenty remedies were bright and good. Why haven't some of our homeopathic schools discovered this man Beebe? He is a born teacher.

In this connection I want to emphasize what was apparent throughout all the bureaus, namely, the determined homeopathic spirit which prevailed. It was always there and broke out on the least occasion. It appeared, as already written, in the bureau of gynecology, in surgery, in clinical medicine, and in other bureaus. I am sorry I did not hear Dr. Martha Canfield's paper, for I have been assured it was a worthy one, dealing nicely with the homeopathic remedies most commonly called for in uterine disorders.

A resolution to President McKinley was presented having relation to the employment of homeopathic physicians and surgeons in the Army and Navy. Another looked to the introduction of a homeopathic chair in the Ohio University.

The paper of Dr. T. P. Wilson of Cleveland was read in his absence, and, as might have been expected from its title—"Is Sanitation Sane?"—and the known views and abilities of the writer, was a bit of sarcastic pleasantry, but well received.

Someone—I do not recall now who, though I think it was Dr. Gann—had something to say about the relative dirtiness of Cleveland and Buffalo; the latter city was a wonderfully clean and healthful city. Dr. Biggar, answering, said that Buffalo was now considered the "Tropic of Cancer," since it was noted for its many cancerous diseases; and that Cleveland stood not far

from the front of the column for reduced mortality. Dr. T. M. Stewart was anxious to know if the cancerous percentage was increased by reason of the Dr. Pierce World's Dispensary being located at that point, to which Dr. Biggar replied that he had no doubt the Gold Cure or Golden Discovery had much to answer for.

The pharmacopœia as adopted by the American Institute of Homeopathy was received with some exhibition of intolerance on the part of many of the members. Mr. Babendrier, a pharmacist, representing Boericke & Tafel, was called on for his views, and said that the new pharmacopœia would necessitate not only an overhauling of our medicine chests, because now the formulas have been in many cases utterly changed, but also called for a re-proving of many remedies, because many of these have had new elements added or old ones taken out.

After Fahnestock had finished his paper he left his sixteen sample vials standing on the secretary's table. My neighbor said to me: "Look at Carter examining those bottles: as he holds one to the light doesn't he look for all the world like that Duffy's Malt Whisky advertisement where that ancient and philanthropic philosopher, with skullcap on, rubbing his chin in a highly ruminative mood, peers through his test tube?" "Yes, indeed," I said; "or like that Ivory Soap ad. where the lady professor discovers that it is 99 per cent pure." But Carter is a good boy, a little over-grown, and, with his present "ginger beard," resembling McCullough's make-up for Othello. But for goodness sake don't say I told you so!

Dr. Laura Brickley always attends the State Society, and is always taking notes for future use. She took a patriotic notion this afternoon to go out to Camp Bushnell and see our soldier boys. The drenching rain which fell for about twenty minutes did not harden the ground of the muddy camp.

Dr. Gann, *pro-tem*, president, caused a good deal of merriment when he said, "I will have to call the presidents to order." Carter and Geohegan were disturbing the peace.

Dr. H. H. Baxter took his share in the *materia medica* bureau; but more of his time was taken up in routine matters of interest to the society and profession. Dr. Quay also appeared to-day and attended all the sections. But other Clevelanders were detained—let me hope—by an excess of business.

There were in attendance about 130 physicians, besides many visitors. The society adjourned at five o'clock.

As a numerous guest at this hotel we have been succeeded by a convention of red-labeled fire-chiefs. When now you take your place at the table, or go up or down in the elevators, or

look at the groups in the office, you are strongly, and perhaps strangely, reminded that we are not all alike in form or features; that our walks in life mark us as definitely, for him who cares to read, as if we were labeled and set apart. There is a very distinct and characteristic difference between the average homeopathic doctor and the average fire-chief. Perhaps, after all, there is a providence in this succession of our convention by a fire-chief convention, since when the doctor is through with a man—or with some alleged men for whom Dr. Beckwith recommends the public whipping-post—the only thing that follows, or is believed to follow, is fire.

THE EDITOR.

Columbus, May 12, 1895.

THE PHILADELPHIA JUBILEE.

WE have heard from one correspondent that the jubilee congress of old Hahnemann College at Philadelphia was the success which we predicted. It couldn't have been anything else, in the very nature of things, and with the men who took part in it. Dr. James presided at the first session, and Dr. C. E. Fisher at the second, in lieu of Dr. Wright, who was not able to be present. Drs. Price, Walton, Dudley, T. F. Allen, and some few others read papers. Dr. Cobb sent his contribution and it was read by Dr. Mohr. Dr. Helmuth delivered an address at commencement. The banquet was an affair not soon to be forgotten, and needless to say it lasted long into the next morning. There were present with the local celebrities also Drs. E. H. Porter, Norton, Helmuth,—Sr. and Jr.,—Roberts of New Rochelle, and others from New York; Drs. King, Custis, MacDonald, Swormstead, and Stearns from Washington; Dr. Cushing from Springfield, Dr. C. E. Fisher of Chicago; and Ohio was ably represented by Drs. Wood and Walton. Dr. Hanchett came in from Omaha in time for the banquet and made an Institute speech. Dr. King was elected president of the Alumni Association for the next year. The participants in this reunion will not soon forget the occasion. Long live Old Hahnemann of Philadelphia and her numerous progeny of eminent men!

Obituary.

WILLIAM S. OWENS.

DR. WILLIAM S. OWENS of Cincinnati has joined the innumerable caravan, and his works live after him. He died in California, December 15, 1897. Dr. Owens was a familiar figure in the profession. He was a faithful at-

tendant upon the various societies of his profession, notably the State and Institute; and he supplemented his attendance with prominent part-taking in their deliberations. He went not only to absorb but to give. This writer knew him well and loved him well. He was a visitor at Dr. Owens' former home in Cincinnati years before engaging in the study of medicine. It so happened that one of our early boy-friends later became son-in-law to Dr. Owens, and that we often accompanied this other young man, and so met not only the charming daughter, Miss Owens, but also the genial doctor. There was then but little thought in our mind of taking up homeopathy—our inclinations and reading having in great part led us to the study of allopathy. It was, however, never of medicine that we spoke in this family at those times, and no amount of prophetic foresight could have foreshadowed that in a few brief years we should sit at the doctor's feet, gladly listening to his medical wisdom, as well as gathering courage and profit from his long life of hardships and varied experiences. Dr. Owens was, as one might say, a self-made man. He was in early life a cooper, a hard-working journeyman; then he joined the army in varying capacities; after studying eclectic medicine elected to practice homeopathy. His success was the usual story of those early and stormy times. He amassed a comfortable living, and his patrons rapidly increased until he was known from one part of the State to the other.

He was a remarkably clear-headed man and student to his dying hour. His opinions he held to with the tenacity of absolute conviction. Of this order was his belief that there is no such condition as hydrophobia in the human species. His treatment of goiter with the kali bichromicum was another; and there were many others. He was earnest, logical, a deep thinker, aggressive, and yet withal he had the heart of a child. In his later years he was sadly broken by deaths in his family, not the least being that of his son William, whose death in California is still vivid in the minds of the profession. His brother also departed this life in California; and now the good old doctor has gone in the same way. Only a few years ago he was severely hurt in a carriage accident, the resulting wound—about the head—having taken on erysipelas; so that he was rarely seen in later years without his little black silk cap. His interest in physiology was so great that he more than once caused the establishment or retention of that bureau in the State and National societies. His teaching in the Cincinnati homeopathic college, his many contributions to professional literature, his work in the legislature to advance and enhance the legal status of homeopathy are so well known

to the present generation that they require no special recounting.

In his demise we feel that we have lost a personal, as the art of medicine has lost a professional, friend. He was ever ready to help the young man with good counsel and in other more practical ways. Had we listened to his frequent counsels we would to-day most likely be practicing medicine in Cincinnati instead of Cleveland. He was a lover of his city and predicted great things for homeopathy there. He was made of that sterner stuff that believed in homeopathy and practiced it without fear and without favor. He stood up for it in public as he did in private.

He was a good man, honest and sincere.

Globules.

When you meet Dr. St. Clair Smith in Omaha, ask him for that story about the Dutchman and the coffin full of cheese.

Dr. J. C. Wood of Cleveland, and Dr. C. E. Walton of Cincinnati, were at Philadelphia in attendance upon the Hahnemann reunion lately. Both took prominent part in the festivities.

Teach the materia medica student to observe first, to listen second, and to question third, and above all to dare to follow the similitum. It takes courage in these pathological days to be a homeopath, and courage is born of conviction, and conviction is the child of truth.—*Geo. G. Shelton, in Trans. N. Y. Hom. Soc., 1897.*

Osteopathy.—This medical cult, operating somewhat aggressively in the Northwest, seems to be consumingly anxious to teach anybody and everybody the trade, whatever it may be. The Ottawa, Kan., branch is sending out propositions to publishers offering \$125, provided that they, through advertising, find some Reuben who is willing to pay \$300 for a course of instruction. The publisher gets \$125 if he finds the Reuben; failing in this, nothing.

From a transcript of the records of the Philadelphia County Homeopathic Medical Society's last meeting we find the following in his discussion of typhoid fever: "Recently," said the doctor, "I have employed very successfully a new food preparation which very materially aids the digestion of caseine, besides imparting a decidedly pleasant taste to milk, making it more palatable. I refer to Eskay's Food. I have found it to as effectively peptonize milk as any agent which has heretofore come to my atten-

tion, besides being inexpensive, and this latter item is important."

The most important articles of diet are clothing, pure food, fresh air, exercise, and potatoes," was a New York schoolboy's definition.

Among the Associated Press dispatches for May 18, was one referring to Mr. Gladstone, the dead Premier, that stated, "He cannot get well as he has now got changed-stroke breathing."

Do you answer advertisements? The publisher of this journal seeks information and offers to anyone who will mention the names of two advertisers in the HOMEOPATHIST, whom they have addressed within the year, to send free of charge, a valuable cloth-bound book of 215 pages, "Materia Medica of Differential Potency."

Among the things to be remembered at Omaha, to be done, is the calling up of the Price resolutions, which were not seriously considered last year at Buffalo. These had reference to the uniformizing of the examination laws of the several States: in short, having a United States examination by State examiners, so that a certificate granted by any one State "goes" in every State. This is a vital measure and should not be lost sight of.

The Homeopathic Medical Society of Chicago, at its meeting of May 5, elected the following officers for the ensuing year: president, Dr. S. P. Hedges; first vice president, Dr. H. P. Skiles; second vice president, Dr. H. S. Lewellyn; secretary, Dr. Wilson A. Smith; treasurer, Dr. Prouty; legislative committee, Drs. J. S. Mitchell, C. E. Fisher, A. K. Crawford, H. P. Skiles, and T. C. Duncan. The next meeting of the society will not be held until the third Thursday in September.

The next annual meeting of the American Medical Association will be held in Denver, Colo., June 7 to 12, 1898.

This announcement will interest two classes of persons—physicians who wish to study at first-hand the effects of "climate cure" upon various diseases, and tourists who are in search of an agreeable summer outing. It is expected, though, that the doctors will find considerable time for sight-seeing; also that many of the tourists will incidentally pick up information of a medical nature.

Secure your tickets via the Santa Fe Route—the best of modern railways. For literature address W. J. Black, G. P. A., Topeka, Kan., or C. A. Higgins, A. G. P. A., Chicago.

Another timely item is that by going to the Rocky Mountains this summer one may get

away from the threatened invasion of the Spanish flotilla along our eastern coasts.

Dr. C. E. Fisher of the *Medical Century* attended the Philadelphia jubilee occasion and presided on the second night of the alumni meeting. After this he journeyed to Washington, and in company with Senator Cullom visited President McKinley and Secretary Alger, touching the admission of homeopaths into the army and navy service of the United States. He finished up his Eastern trip in New York looking after his business interests.

The Hahnemann monument fund is still laggard. Gentlemen and ladies of the profession, here is the proper place for some of your surplus cash. There was never a more worthy "charity" in all the profession. A few dollars given to this monument will not tend to decrease your chance for bread-winning, as is so often the case when you contribute to popular charities like hospitals and dispensaries. It is your duty to support Dr. McClelland in his noble purpose to perpetuate the memory of the discoverer of homeopathy.

Having done this let your well-doing not cease, but send a few francs to the tomb committee, who have now arranged for the removal of the body of Hahnemann from his obscure resting place in a rented grave in Montmartre to a proper and notable sepulture in Père Lachaise, Paris. Here Hahnemann will lie in the midst of the celebrities of France.

In the treatment of umbilical hernia in children Dr. J. Madison Taylor prefers the following method to the large button so commonly employed: The child is laid on its back, knees drawn up; the operator gathers with finger and thumb of both hands a long vertical fold of skin from each side of the abdomen; with the forefingers the central mass is pressed over the umbilicus, at the same time drawing the lateral folds over this, meeting above. Fix in position with a four-tailed strip of adhesive plaster, the tails reaching well beyond the lateral mid-line of the body. Renew the dressing once a week.

"For nine years I suffered from stomach trouble. I tried the aid of the best doctors of Philadelphia and Pittsburg, and spent large sums of money, all in vain. One day I picked up a paper with a notice of A——'s ——-. I got one bottle to try it. It did me so much good that I purchased five more bottles. I took four of them, and now I can eat anything." Certainly the four bottles, if of considerable size and thickness of glass, would test the digestive powers most thoroughly. By the way, this same A—— is a liberal patron of the advertising col-

umns of *some* medical journals. Is he trying to convert the "best doctors of our sister cities"?

Owing to the peculiar action of calcarea carbonicum, it is one of the most important in the materia medica, and frequently overlooked. It acts primarily upon the vegetative system, exciting moderately the functions of secretion and absorption. Patients with light hair and blue eyes, who are capable of little physical endurance, although possessed of large muscles, and who are naturally inclined to be indolent, or those who are imperfectly nourished, and who seem to have come into the world half made up, appearing to live in constant fear of scrofula, tuberculosis, or rachitis, will find calcarea carbonicum an important remedy.—*C. Spencer Kinney, in State Hospitals Bulletin, July-Oct., 1897.*

Dr. Henry T. Byford reports, in the *Chicago Medical Recorder* for April, the successful removal of an enormous dermoid tumor, which weighed over seventy pounds. After the first week following the operation he placed the patient on "Maltine with Cod Liver Oil," with most gratifying results.

It is not yet too late to send a postal card to Mr. B. Silloway, proprietor of the New Murray House, Omaha, Neb., for your room during the American Institute of Homeopathy session. But don't put it off any longer. Remember that it will also be exposition time, and rooms—good rooms, with your friends—may be difficult to find after you arrive there.

The Nickel Plate line from points in the far East, through Buffalo and Cleveland, to Chicago will be one of the best ways of reaching the latter city. You will find not only that the accommodation is the equal of any other parallel line, and in many respects better because unique, but also that the fare is less. Write to the company or its nearest agent and see if we speak not truly.

And from Chicago take the Chicago, Milwaukee & St. Paul to Omaha. Look at its time table in any railway directory, look at its equipments, its enterprise and railway progress, and you will be convinced that this is the only road for you to travel over in your jaunt to the American Institute at Omaha. It's just as much "official route," and the rate is just the same as any other.

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FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



WILLIAM HARVEY KING, M. D.,
New York.

FINALLY, MY BRETHREN.

AS we approach the next session of the American Institute of Homeopathy we are moved to hope that nothing of a disturbing nature will be permitted to enter and defeat the promised peace and serenity of the meeting. The Omaha Local Committee, aided by the generous West, has gone to great expense of "blood and treasure" to make this *the* banner meeting of all the long line of annual sessions of our popular Institute. Arrangements have been

perfected for every comfort of the member and his friends. Hotels have been seen and reduced rates secured. Railways have agreed to reach the city with special and excursion trains. Amusements and excursions have been planned without number. We do not remember when, in the last ten years, the Institute has had a brighter and more welcome welcome awaiting it than now at Omaha. Denver was hearty enough to be a record-breaker: but Omaha promises even more.

It must not be forgotten, however, that the Institute is composed of "Many Men with Many Minds"; that these various minds will always be, as they should be, in evidence. This is true progress. A mind which does not change is dead. So it would prove with the Institute. The ideas which obtained ten years ago—nay, even last year—have undergone changes; some very radical, others not so marked. Still the change is on all. The men and women who come up from a busy practice and gather each year about the altar of the Institute may show no change in outward seeming and comeliness, but it is there notwithstanding, and only when some loved and prominent member like Sawyer, or Lilienthal, or Owens, or Dake fails to answer to his name at roll call and is seen no more, do we mark the gradual but ever changing of the Institute. But blessed be God! The Truth continues, and the Institute prospers.

It is true that these changes in opinion are frequently the outgrowth of what for a time may seem bitter and unjust criticism in member, and profession, and journal. Take, for one instance, that secession in the Institute which resulted in the walking out of so many prominent members from the Milwaukee session, and the resultant formation of other bodies of homeopathic practitioners. For a time this was looked upon with dismay. There was much unhappiness in the profession, and many hard words were passed. But in the light of to-day we know that all save one of the societies which sprung out of that defection have gone to the wall; and that this remaining band meets annually in the shadow of the Institute—in order to have a working quorum.

The practical result of that mutiny has been that from the day of that mutiny a new spirit arose in the Institute, which grew and waxed strong and added to itself numbers, until now no man or woman need fear a public avowal of belief in the use and efficacy of the high potency. Had the principle embodied in the party in power at Milwaukee continued in existence, there would to-day be an exceedingly sparse membership: for the present generation has ceased to scoff at high potencies, and though it may not use them, it has become more tolerant of them and their users. And *per contra* it is equally true that the high potency users are able to meet the low dilutionists and no longer refer to them as mongrels, apostates, and so on. So that the criticism, sharp as it was at and after the session, after all tended to the good of the Institute.

For at least ten years we have had great pleasure in being personally, and in many instances intimately, acquainted with the membership of our great national society, and known well each of the long line of presidents, who have been distinguished in their professional as they have in their official positions. There has not been among them a single instance of a man who has been aught but a shining light and an honor to his Institute. It is very true that with the fires of antagonism lighted by the former system of election, many things were said and done in the heat of the campaign which a cooler quarter-hour showed to be unjustifiable. But, after the lapse of a few years,—nay, even during the incumbency of that officer,—the falsity of charges preferred has been many times demonstrated. A party to rise in power must concentrate its work. If successful it is in the face of a parallel concentration on the part of the opposing party. This concentration of power of the “ins” is always designated as the “ring” or “bossism” by the “outs.” That some of the presidential battles of the past few years have been closely fought and turned by but a vote or two, shows only the metal of which the opponents are made, the enthusiasm by which they are actuated, and the vigor instilled into a campaign having for its reward naught but an honor.

Dr. Wright, the present honorable president, has grandly and truthfully said that a free criticism by the profession through its mouth-piece, the journal, tends to improve the tone of the Institute. It eliminates the tendency to routinism and stagnation. It incites interest in the doings and saying of that Institute, concretizing the very best in the profession, until at length the Institute becomes in very fact the visible head and front of the profession. It is thus in political life. The party in power represents a certain principle. If it fails to carry

out the principle the people destroy the party. So with the Institute. Some man representing his party may be elevated into power; this principle may be proved untenable before the close of the current administration and be destroyed.

At this present moment the question most ardent seems to be the Senate of Seniors. A number of the journals have taken this question in hand, and the AMERICAN HOMEOPATHIST has admitted several communications into its pages discussing this subject. Some grave allegations have been made. Allowing for the partiality of the writers, it would seem, nevertheless, that in some respects the conduct of this eminent body would not suffer by a change. This is not to be construed into a demand for its abrogation. We have no such thought: no one in the profession has a higher regard for the Senate of Seniors than this writer. But he is not blind to the fact that many of its works have laid it liable to misunderstanding, and so rendered nugatory its higher and nobler aims and principles. It is truly a beautiful thought that after twenty-five years of such struggle as only a doctor knows, the Institute puts that faithful veteran on the List of Honor. It believes that he has been seasoned in the school of adversity, so he will be a safe counselor in matters requiring impartiality and coolness of judgment. The most questionable part of its existence consists in its secrecy. That which is hidden is always mysterious. A policy rigorously withdrawn from the public is assumed to embody that which the public should not see. This gives rise to doubt and distrust. Some of the charges made allege that the Senate of Seniors combines its forces for improper purposes. The Senate of Seniors indignantly repels the accusation. And there you are! Someone inclined toward statistics quotes a fair negative from the record. It would seem that the best manner of correcting this trouble lies in the removal of that selfsame element of doubt and distrust—the veil of secrecy. True, even this radical measure would doubtlessly fail, for if the individual members of the Senate, as charged, are disposed to wage a combined warfare upon younger aspirants to Institute honors, then the mere throwing open of the meetings to public scrutiny would not bar these individual members from further plotting against the others. So it is clearly a ticklish question. Let some of the more advanced and progressive members of this honorable body take this subject in hand at once, in advance of the meeting, and bring a peaceful correction of the alleged difficulty to the “juniors” at Omaha.

Let the Seniors meet the Juniors and agree upon some policy mutually agreeable.

And, in conclusion, it pleases us to know that

so few of our Institute members have been called to swell the Great Majority. We will again see and meet the veterans of the Legion, and return to our task refreshed by this annual draught of inspiration. It does good to the younger as to the older member to hobnob a few days each year with the eminent men of his profession—the authors, bookmakers, teachers, writers, and practitioners. There is that very witchery of personal contact with our brother in the same line, which tends to tide us over many somber places in the coming twelvemonth. There is that other and grander feeling that there still remain with us in the Institute men who were most closely allied with the beginning of practical homeopathy in this land; and that as the years go by one by one these pioneers will fall by the way, and be seen no more of men until the heavens shall cease to be. It will be something to say to our successors that we knew and loved Talbot and Helmut and McClelland and Ludlam and Wesselhoeft and Buck and Allen and many of the present-day heroes of many a hard-fought homeopathic battle. As it is grateful to-day to all of us to remember the gentleness of Dake, the never-tiring industry of Lilienthal, the unconquerable devotion to homeopathic supremacy of Sawyer, the indomitable perseverance of Owens, the studiousness of Hering and his pupil Farrington, and the others who have gone before.

Let us meet and have a good time. Let us part at Omaha after that good time feeling that our Institute labors have been productive of the greatest peace and unanimity of feeling and purpose. So that if by chance the one or the other of us is cut down by the Relentless Scythe of Time, no sting will be left in the hearts of the survivors for the things said and done to that man or those men when last they were met.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Xanthoxylum IN UTERINE FIBROID.—Dr. P. C. Majumdar³⁹ was called to see a woman of fifty-six suffering from uterine tumor, for whom an operation had been advised. She was emaciated, feeble, and wrinkled, with poor appetite and disgust for food. The climacteric occurred at forty-one years, before which she always had profuse, early, and painful menstruation, preceded and followed by leucorrhœa.

She was nervous, depressed, and always lazy and sleepy—even in daytime. There were neuralgic pains in the right ovarian region. The tumor, the size of a small orange, was hard and movable. She had pain on deep pressure over it, and an offensive yellowish white discharge from the genitals. *Xanthoxylum* 3x was prescribed, given morning and evening.

After a week pain was less, discharge less and of not so bad an odor, and the appetite improved. In two weeks more the tumor was half its original size, and the patient a changed woman. The remedy was given now and then for six months, when the tumor and concomitant ills were gone. Two years later she was still free from complaint.

Rhinoscleroma Cured by Auronatum Chloratum 5x.—Dr. Kranz-Busch^{28 29} reports the cure of this “incurable” (?) and dangerous disease. The patient first noticed the disease when three months pregnant, at the age of twenty-three. There had been no syphilitic taint. In the autumn of 1887 there appeared a slowly increasing darkness and discoloration of the right upper side of the nose, about the size of a threepenny bit, and a few weeks later a similar swelling on both alæ nasi. The medicines prescribed did no good. The shape of the nose became much altered, its point became flattened, the alæ broad and immovable; on the left surface of the septum there was a copper-colored hard lump which interfered with breathing. This was scraped off with a spoon and then burnt with lactic acid. This operation only gave temporary relief. On the upper lateral aspect of the nose, on the alæ nasi and septum, there are copper-colored, elastic, shining indurations. The skin around is normal in appearance. The lumps can be moved along with the skin; they are quite painless even when pressed strongly. There is no appearance of inflammatory action. The nose is flattened. The patient has a nasal tone of voice, the left nostril is much narrowed. When cut or pressed with knife or scissors there is no reaction; the wounds heal readily. The patient is otherwise well; nurses her baby. The treatment was strong doses of pot. iod. for a long time, an ointment of galls, and curetting, all without any benefit. The disease began, as

before said, in the third month of the first pregnancy, and increased during the pregnancy. After delivery the lumps became somewhat smaller. In the second pregnancy the disease increased. The nose became larger, reddish-brown or purple, and a number of smaller lumps the size of sago came in addition to the larger lumps. After delivery the disease ceased to increase, but did not diminish. In 1891 she again became pregnant. Then the disease involved the left cheek. Post-partum the disease came to a standstill; but the patient's face was so disfigured that she would not venture out of the house by day. In 1893 she came under the treatment of Dr. Kranz, senior, after which the disease did not increase, although she became pregnant for the fourth time. The disease now began to diminish, and two subsequent pregnancies in 1892 and 1895 caused no relapse. Dr. Kranz's treatment consisted of repeated doses of *auronatum chloratum* 5x. This treatment was continued by his son, Dr. Kranz-Busch, until at length a perfect cure was effected, and the nose and features resumed their normal appearance. The lumps gradually disappeared together with the discoloration, the nose became of its original shape, and the nasal passages free from all obstruction.

Verbena Hastata IN EPILEPSY.—Dr. J. N. White³⁸ treated a boy of five for epilepsy developed during whooping-cough. For five months sulfonal controlled the paroxysms, which occurred without it several times a day. Meanwhile, bromides, purges, oxide of zinc, and other allopathic remedies were given with no permanent effect. Finally Dr. White stopped the sulfonal and put him on *verbena hastata*, 12 minims every four hours, omitting the midnight dose. From first dose of *verbena hastata* the boy began to improve. He would have contractions of the muscles of the arms and legs and look wild for a minute or more for the first week, but after that he never had another symptom. We kept him on the medicine, as above, for six weeks, and now he takes 12 drops three times a day.

He has not had any symptom in over two months, and all that wild vacant look is gone; and he plays, eats, sleeps, etc., as if he had never been troubled with epilepsy.

A Nitric Acid Case.—Dr. Mohr: "This

was a man who had a great deal of trouble with vomiting and constipation, with occasional attacks of diarrhea and some hemorrhage from the bowels. He was treated for some months for gastralgia; he was treated for some years for constipation, and occasionally he was treated for diarrhea, particularly when it was associated with hemorrhage and led to considerable depletion; but, unfortunately, this man had never been examined physically, and I was astonished at that, because he had such violent pains in the region of the stomach and the hepatic region. An examination revealed a cancer of the liver. He did suffer the tortures of the damned with that stomach and liver; he could not sleep, he could not take nourishment without causing a great deal of pain; and mostly followed by vomiting, so that he became very much emaciated and anæmic. I will tell you what nitric acid in the third decimal dilution did. It stopped his pain in the liver and stomach, it stopped his vomiting, it stopped his constipation, he had movements from the bowels every few days, quite well-formed, and that man absolutely died of a cancer cachexia, without suffering one hour's pain after he got that nitric acid."

Senecio Aureus IN PUERPERAL MANIA.—Dr. Selden H. Talcott⁹ reported a case of insanity promptly relieved by this drug, seldom used for mental cases. The patient was a female; age, twenty-six; married, two children; was admitted to the Middletown State Homeopathic Hospital, June 17, 1896. This patient had worried over the possibility of her child being stillborn, and nine days after it was born, strong and healthy, she was admitted to the hospital in a condition of violent acute mania. Intense mental excitement continued for three months, relieved in no respect by the usual remedies. The bodily temperature remained high; the patient was very active physically, and the mental state was that of a wild, violent, and almost uncontrollable person. We ascertained at last that the lochia had subsided suddenly after childbirth, and that the menstrual flux had failed to appear. On account of the amenorrhœa, coupled with a continued mental excitement, severe pain in the head, great nervous irritability and sleeplessness, and hysterical erethism, we gave her *senecio aureus* in the third

decimal dilution, drop doses every two hours. She took the first dose of *senecio* on the 15th day of September. In less than three days she was improved, and on the 21st the record states that she "seems more quiet and rational than at any time." On the 24th the case-book shows that she is "improving every day." On the 26th "appears more rational; sleeps well." She menstruated in October for the first time in several months. On the 20th of October she seemed to be free from delusions and well-balanced in mind, but was not very strong in body. She made slow progress in the line of physical recuperation, and, though fat and healthy in appearance, she showed for weeks great weakness of the entire bodily system, as is usual in such cases.

A parole was followed shortly by a relapse for which *senecio aureus* was again given, after *belladonna* had been only partially successful. From this time she improved rapidly, both physically and mentally. She menstruated naturally, and all the physical and mental functions were again performed in a normal manner. The patient was allowed to return to her home on the 15th day of February, 1897 (on a thirty days' parole), and was discharged recovered, March 17, 1897. Since that time she has remained in good health, both physically and mentally.

While the proving of *senecio* is not very elaborate, and while there are but few mental symptoms recorded, we find enough to lead us sometimes to the use of this drug. It seems to have a place of action midway between the fierce, hot, pugilistic mental state of *belladonna*, and the mild, tearful, and changeable condition of *pulsatilla*. Recovery from puerperal mania is seldom effected unless the menstrual function is re-established, and in attaining this desirable end the efficacy of *senecio aureus* may be more fully recognized in the future.

IODINE IN EXOPHTHALMIC GOITER.

By ALFRED HEATH, M. D., London.

THE paper on the action of *fucus vesiculosus* by Dr. Foster, in the AMERICAN HOMEOPATHIST of May 2, is one of very great interest, showing, as it does, the wonderful action of

iodine in curing goiter and the wonders of the "law of similars." There is no drug that shows this law more clearly than iodine. It makes fat people lean and it makes lean people fat. It has the power of producing in the healthy both conditions, as we know the *fucus* does. It is the Pharaoh-lean-kine medicine of homeopathy, but the curious part is that it only makes *fat* in the lean, and in the fat people it only removes the fat. Sheep that feed on seaweeds, especially the *fuci*, put on an external coat of fat, but internally they are lean, so that it has the power of producing both conditions, which is an iodine state. Two of the most important medicines in goiter are iodine and *spongia*—both of which are obtained by incinerating marine plants, such as seaweeds and sponges. Iodine is the active principle in both cases.

I have just had a case of exophthalmic goiter in a young lady of about twenty-five. More than one member of this family has had the disease badly. Symptoms of this case were great palpitation of heart, with night aggravation; considerable enlargement in right thyroid. As the case was taken in time, the prominent eyeball was prevented, but in other members of the family it was very pronounced. Iodine 30 has removed the palpitation of the heart, and the gland is almost normal in size. In a week or two will probably be quite so.

114 Ebury Street.

THE KENTUCKY MEETING.

THE thirteenth annual meeting of the Kentucky Homeopathic Medical Society was begun in the great parlor of the fine old Capitol Hotel, Frankfort, in the usual ecclesiastical manner, standing and in silence, after the members were called to order by President W. F. Reilly of Covington, Elder George Darsie of Frankfort asking the divine blessing. Hon. Ira Julian of Frankfort followed with something more inspiring, really one of the good things of the meet, an address of welcome, both cordial and eloquent, which was feelingly responded to by Dr. J. T. Bryan of Louisville. The credentials of visiting brethren were received by Secretary F. W. Fischbach of Newport, and they severally, and two-thirds of them neatly, responded—bluff, but genial, Dr. C. E. Walton of

Cincinnati for Cincinnati and Pulte College; studious Dr. C. E. Kahlke of Chicago for Chicago and Hahnemann College, and Dr. W. B. Clarke of Indianapolis for the Indiana Institute of Homeopathy. A little routine business brought the programme up to the president's address, whereupon some thirsty sojourner and adjourner got in his work, which motion was carried with a rush. This left those on business bent with about half the afternoon on their hands to spend as their sweet fancy dictated. The great majority, including your correspondent, naturally gravitated toward the penitentiary—but not, let us hope, in accordance with the theory that birds of a feather flock together—where much of interest was seen.

The evening session began with the president's address, which was very sweet and all too short. It made a strong plea for legislative justice for our school and its representatives in relation to State and municipal appointments and positions, and outlined plans of action necessary to secure the result. He showed how the old school was adopting our medicines and small doses, and alluded to their stereotyped cry of sectarianism, while they continued to ostracize us from society membership. The address was well received, and the committee to which it was referred reported favorably upon it.

A discussion of the inter-State resolution of the American Institute, similar in tone, followed, the resolutions being adopted.

Dr. Sarah J. Millsop of Bowling Green then made a strong appeal for more money for the Hahnemann monument fund, and said that she was ashamed to go to the American Institute meeting at Omaha in June with only \$160 from Kentucky—the amount now secured.

The bureaus were then opened, that of *Materia Medica* first, but only two short papers were found in its drawer. "Suggestions for the Use of *Apis*," by Dr. A. L. Monroe of Louisville (a gentleman whose "doctrin" is well known, both North and South of an imaginary line sometimes called Mason and Dixon's), and "*Syphillinum*," by Dr. J. W. Kirchbaum of Danville. Clinical medicine followed with two papers also, the first by Dr. W. B. Clarke of Indianapolis, on "The Cause and Treatment of Cancer," which has a bibliography of about

sixty recent essays on the subject, and "Malaria in the Ohio Valley," by Dr. H. E. Griffith of Henderson, whereupon the mention of the name of homeopathy's father's son, quinine, stirred up a lively discussion and elicited some spread-eagle blue-grass oratory, which told how the graves in the cemeteries on the hills of Kentucky "were bittah for ten feet around, for the quinine its victims, their occupants, had taken," and then sat down. The adjourner here got in his deadly work again, and various pastimes were indulged in.

It was much harder to get them together than to get them apart, but finally about eleven o'clock the following day they got together again and disposed of four more papers, viz., in the bureau of Surgery, "Post-operative Treatment of Abdominal Section," by Dr. A. C. Leonard of Lexington, and "Urethral Stricture," by Dr. C. E. Kahlke of Chicago, both fine papers. Obstetrics brought forth "The Treatment of Abortion," by Dr. J. T. Bryan of Louisville, who advised cur-etting; and in Gynecology the jovial and gigantic Dr. M. Dills of Carlisle showed how to wield the keen rapier of homeopathy, when tipped with a 1m. remedy, in a paper entitled "The Indicated Remedy *vs.* Local Treatment in Ordinary Uterine Troubles." An orderly adjournment was now in order, as it was for dinner.

On reconvening the election of officers was decided on, as well as the omission of two bureaus entire—O. and O. and Pedology—as many wanted to leave on the three o'clock trains. Of the twenty-eight papers on the programme only eight were read. But the members separated declaring that the meeting had been the most successful and best attended one the society had ever had. The attendance was about forty-five, all told. The only pharmacy represented was the Wise of Kansas City, through its southwestern branch, by Dr. Meredith of Louisville.

The seven new members elected were: Drs. J. E. Mann and H. E. Milton of Louisville; J. B. Lehman, Frankfort; C. J. Pollard, Cobb Station; F. D. Kappell, Owenton; F. M. Favies, Paris; F. E. Peck, Cynthiaana.

Lexington was selected as the place of meeting for next year.

W. B. C.

Vol. No. 30.

The Medical Arena:

THE GYNECOLOGIST: HOW TO AVOID HIM.—To be brief, all these claims, and more too, are admitted; but what can we do to right them? Perhaps not much for our own generation, but he who helps to make the next generation better has not lived in vain. That lies in our power. Let us again have boys and girls, good healthy young animals, neutral in sex, in a hurry for breakfast, quick to absorb the fundamental school work, but in all else romping, happy, jovial children. Children who become physically tired, but never mentally; who never are told they are "nervous" or taught to watch for symptoms. Who do not rise, eat and drink, and go to sleep on "don'ts." Who see about them a good world, and glad they are in it. Whose conception of life is to be happy and help others to a like happiness. Let us not begin at eight years to stuff them with imperfect physiology, but rather place them in the gymnasium and the bath, and teach them to be strong and clean, and to love their fellows; and do not fear for their future theology, for even one's *own* Christ cannot be to her above the possibilities of her own conceptions, and the conceptions of the child strong in mind and body and sweet toward those about her may be trusted. Forbid society to school girls, and keep them girls as long as possible. Encourage them to love and care for those who are younger, and let them see in motherhood the perfect fruition of woman's life.—*Benj. F. Bailey.*

The Pacific Medical Journal:

MEDICAL TRAITORS.—The supreme act of turpitude upon the part of a medical man probably consists in the use of his knowledge to connive against the interests of a fellow-practitioner. A physician who will go into open court and coach an attorney in an effort to prevent another physician from collecting a just debt should forfeit the respect, confidence, and society of the entire profession. California is disgraced by two or three such individuals, the most recently misguided one being Dr. X.

Dr. E. M. Paterson, one of Oakland's most scholarly and competent physicians, treated a

lady of Berkeley for months and months, doing long, tiresome attendance, and performing a capital operation, with the happy result that the patient fully recovered. She was a member of the family of a wealthy man who twenty years ago practiced medicine, and who, because of his previous connection with the profession, refused to pay for medical treatment. Dr. Paterson justly sued for five thousand dollars. The defense argued malpractice, and Dr. X acted as medical adviser to defendant's attorney, coaching him with catch questions, aiding to the best of his ability to break down expert testimony, and doing whatever else he could to defeat Dr. Paterson's claim. This same Dr. X is a teacher in a medical school, a position in which a man is expected to be an example of professional honor as well as of professional ability, and every honorable physician will regret to see his talents, though small, thus misapplied. It would be less base to violate the confidence of your bosom friend or to divulge the sworn secrets of a fraternal order.

Since the above was written Dr. Paterson has received judgment for \$1750 and costs.

New York Medical Journal:

THE BICYCLE AS A THERAPEUTICAL AGENT.—At a recent meeting of the Berlin Society for Internal Medicine, the proceedings of which are reported in the *Klinisch-therapeutische Wochenschrift* for April 17, Dr. Siegfried combated Mendelsohn's objections to the use of the bicycle under certain conditions. In particular, he contended that bicycle exercise did not give rise to sexual excitement unless the saddle employed was faulty. He had found bicycling of decided benefit in a number of cases, and he spoke of the systematic use of the bicycle under the name of cyclotherapy. One case of its usefulness was that of a merchant, thirty years old, who had suffered severely with articular rheumatism for several years and had ankylosis of the lower limbs. The man was so despondent as to contemplate suicide. Surprising improvement had followed the systematic use of the bicycle. The patient's despondency had been altogether overcome, and he now attended to his business with alacrity. There was still ankylosis of the hip, and the man

limped, but he used no support in walking and his knee joint was quite sound. Gradual improvement had occurred in the case of an old lady who was suffering with sciatica, also in that of a man, thirty-six years old, with septicæmic inflammation of the knee. The author affirmed that the bicycle treatment was slow but sure. Another case showing its efficiency was that of a lady, fifty-four years old, who for ten years had suffered with gout and articular rheumatism, together with mitral insufficiency. In this case also the effect upon the patient's mental condition had been striking. Finally, the author spoke of the case of a lady, twenty-two years old, who had isolated atrophy of the quadriceps extensor cruris and the psoas and iliacus muscles, to whom the use of the bicycle had been of benefit.

The North American Journal of Homeopathy :

THE OLD LINE INSURANCE COMPANIES.—The discrimination against homeopathic physicians to-day as life insurance examiners is due almost entirely to the fact that the chief medical officer of the various companies is an allopath. Naturally, he appoints only men of his own kidney as examiners. The pressure of public opinion, however, has forced them not only to cease offering the slanderous reason that "homeopaths were not as well educated," but has made them actually, in certain instances, appoints homeopaths as examiners. But this advantage is more often apparent than real. More than one homeopathic examiner has been appointed by the Manhattan, the Equitable, and the Penn simply to enable them to be able to say they made no discrimination in their appointments. But great care is taken that not a single case for examination is ever sent to the new-school appointee. Let us not be humbugged in this matter.

The Critique :

Referring to the *Critique* excursion through the Rocky Mountains: We find a number of inquiries coming in regard to a trip to Denver, Colorado Springs, Maniton, and over the Loop. Therefore we have decided, in addition to running an excursion to Salt Lake, to also have one to Denver, taking in Colorado Springs, Manitou, and a trip over the Loop, consuming

in the neighborhood of four days. The Colorado committee who will be in attendance at the Omaha Convention will be in a position then to name exactly what it will cost for the several trips contemplated in addition to the one to Salt Lake.

The Medical Arena :

The American Institute is an organization of which the school should be proud. It is the oldest national medical society in this country, a fact that need furnish no indication that it has lost its virility or its touch with modern ideas. It has a history to which all can point with pride. It has defended and maintained the rights of the school in a way that has made homeopathy respectable and free in this country. In the past it has fostered its educational institutions, a circumstance vital to the future of the school. It has done vastly more in the elevation of medical education to a higher plane than any medical body in the country; and all this has been done along lines of true progress, not in the direction of revolution and the establishment of medical oligarchies in the different States. It has protected the rights of homeopathy in sections of the country where our representatives were unable to protect themselves. The record is a proud one and there is no necessity of hastening it into a period of dotage and effeminacy by continuing objectionable features in its organization and management. Let these be abolished, and let our national society continue to march on to new duties and triumphs.—*S. C. Delap, Editorial.*

The Cleveland Plain Dealer :

CHAMPION ATHLETES AS SOLDIERS.—It is said that in numerous instances since the breaking out of the War surgeons have rejected "champion athletes" as unfit for the duties incumbent upon a soldier. It must be peculiarly vexing to a young man who has made a specialty of developing his physique to find that as the result of all his efforts to attain bodily superiority he is in no condition for military service—one of the best practical tests of a man's physical worth. The fact of the matter is that muscular strength and constitutional endurance are two different things, and that the person who unduly develops his muscular strength does so at the expense of

the rest of his system. Men equal to the extraordinary feats of strength in certain directions are not as a rule long-lived. Athleticism, beyond a certain limit, does not conduce to health or usefulness. The best development, physical or mental, is symmetrical. As a waterway is practically no deeper than its shallowest place, so a constitution, especially for war purposes, is no stronger than its weakest place. The strength of the normal young man, though his muscles are not particularly in evidence, is equalized, and can stand a strain at all points.

[Cigarette smoking, also, has thrown out a great many would-be soldiers.—ED.]

Minneapolis Homeopathic Magazine:

BACTERIOLOGY A FAD.—Dr. Gibbes, after occupying the chair of bacteriology for some ten years or more at Ann Arbor, has accepted the position of health officer for the city of Detroit. . . Dr. Gibbes to-day denies bacteria as a causative factor in disease. It has to be borne in mind, too, that in publishing this statement he does not give it as his opinion merely, but as a fact based upon actual experiments; said experiments (consisting of inoculation with bacteria) having been performed upon himself time and again without the slightest effect. He not only says that the idea of dodging a bacillus here for one thing, and another somewhere else for another thing, is absurd and "simply a fad," but he absolutely denies the fact—hitherto urged as a proof of their ætiological nature—that these pathogenetic micro-organisms are always present in disease. He says: "I have conducted hundreds of autopsies on consumptives without finding a trace of the bacillus tuberculosis. . . I taught along the lines of Koch, but presented results for what they were worth only. There is no such thing as *German science*; *science is universal*. My personal investigations have convinced me that the whole germ theory of disease is a fad. In Germany Dr. Koch's theories are regarded as *theories* only; but in this country they are held too frequently to be facts." Such words from such a man are pregnant with thought.—*Editorial*.

The American University at Harriman, Tenn., has conferred the degree of LL. D. on Dr. Bushrod W. James.

DEATH OF PETER DIEDERICH.

WE learn with much sorrow that our good friend and former family physician, Dr. Peter Diederich, died very suddenly of septic cystitis on April 6, 1898.

When the mother and brothers of this writer lived at Wyandotte, Dr. Diederich was their family physician, and every member of the family had learned to love him, both as a physician and friend. He was the embodiment of courtliness. Never obtrusive in meeting, never the first with the newest of new fads. He was a good listener, yet when the occasion demanded he was a fine speaker. He was always a student. It seems now that he was an older man than we who thought we knew him best had any suspicion. He was born in 1842, so that he was fifty-six years of age. He never showed that age. His step was as young as his interest and his ambition. He was a frequent contributor to these pages, though most often under a *nom de plume*, from a horror he had of advertising himself. We shall all miss him sorely.

DR. J. RICHEY HORNER'S COLUMBUS LECTURE.

ONE of the events of the Columbus meeting of the State Society was the illustrated lecture given by Professor Horner on the night between the two days of session. He came prepared with calcium light and stereopticon paraphernalia, and, with a good-natured audience assembled, gave a neurological talk profusely illustrated with "slides." By this combining of pictures with talk he was enabled to hold his audience for over an hour, when, ordinarily, a neurological lecture is an exceedingly tedious affair, filled with as many big words and big ideas as ophthalmology or otology. Thus it is safe to infer, since Dr. Horner was able to keep his audience interested and necessarily instructed for the time that he held them, that the work was well done. Dr. Horner has given his specialty an immense amount of study in this country, abroad, and again at home, and is one of the most competent in his specialty. We are glad to be able to call him a Cleveland now.

DR. ELDRIDGE C. PRICE.

WE learn with much regret of the severance of editorial connection between Dr. Eldridge C. Price and the *American Medical Monthly*, which has just taken place. We are unable to learn particulars leading up to this act on the part of Dr. Price. Under his care and overseeing the *American Medical Monthly* was rapidly passing several points ahead of the majority of its contemporaries, and bade fair to hold a first rank in the affections of the profession. We have said it before, but repeat, that the profession at large—those who pay for their journals—admires a man with an opinion and an ability to state it. And Dr. Price is of that class. The AMERICAN HOMEOPATHIST has had numerous occasions to cross swords with him; but we never believed him malicious in his criticisms. It is so deadly easy to fill a few pages of a journal each month with namby-pamby, daintily-scented editorials which draw neither blood, fire, nor attention. Dr. Price has had editorial charge of the *American Medical Monthly* since it left the hands of its original founder, Dr. C. E. Fisher, under the name of the *Southern Journal of Homeopathy*. It has been kept well in front, and was becoming a leader in its interpretation of the Baltimore Investigation Plan. We have always admired the courtliness of the writings of this doctor, and even when most severely arraigning our policies we have done him the justice of believing him sincerely honest. We indulge the hope that Dr. Price may not long remain lost to the editorial fold.

"D. O."

THE D. O. fellows in Kansas City seem to have been engaged in something beside diplomacy. The title which the National School of Osteopathy has been conferring—D. O.—seems to stand, according to the diploma, for Diplomat of Osteopathy. From the Kansas City *Star* we learn that a "Dr. H. B. Stewart of Springfield," by dint of a little persistence and the d. o. "dough,"—the payment of \$150 in hand to the president of the college,—secured a diploma without attending a single lecture. Dr. Stewart, however, was not himself at all,

but another party entirely, who assumed this name and locality in order to show up the rascality practiced in the conferring of the Diplomat title. He seems to have made a good case, since the *Star* prints a photographic copy of his diploma duly signed and sealed. From private advices it would seem that a homeopathic school in Kansas City would do wisely if it abjured all connection with this osteopathy fad.

THE NEW YORK HOMEOPATHIC.

WE have risen refreshed and exhilarated from the reading of the commencement exercises of the New York Homeopathic College, as printed almost in full in the *Chironian*. Each year we watch for this issue, for we have never yet failed to find it filled with instructive speeches, poems, and proceedings. And this year is no exception to its many predecessors. If there is ever any ripple below the surface in the New York school, somebody is exceedingly wise and careful that it never finds its way to the footlights. But we sincerely believe that the New York school, like the Hahnemann of Philadelphia, is governed by men who have a large principle at stake, and who never permit aught but that tending to the greatest good to the profession to enter the college portals. We intend, at an early date, to review the speeches of this last commencement, as given in the *Chironian* at full. They are masterpieces of wit and good English. The poem by Helmuth shows no abatement of his pristine vigor. Lookin' at you, professors and teachers of the New York College, and the class of '98!

PATRIOTIC ADVERTISING (?).

AMID all the uncertainties which hedge about the war news, its doubts and disappointments, it is such a relief to find the reliable, unmistakable, always-cured, never-fail testimonials of the patent and clap-trap medicines. Sampson may fail to have his picture in the papers one or two mornings of the week; Schley may not have expressed the belief that the Naval Strategy Board is hindering him and the other fighters from putting an end to the foxy Cervera. Fighting Bob Evans may not have had a chance to change the language of

hell to the Spanish; but Hood's Sarsaparilla, and Lydia Pinkham, and Castoria (none genuine unless the firm name is written with a marking stick and in black ink), and Talmage's Third-Marriage Nervura, and Johann Hoff's Malt, and the other eyesores are always there, and, so to speak, with both feet. If only some supreme legislative power could forbid these quack-medicine firms the use of the historical figure of Uncle Sam and of Old Glory! We could pardon the buxom matronly female in fourteen-button black kids in the Pinkham ad.; the man in undress regalia wrestling with the horns of an enraged bull in the J. Malt ad.; the dapper, full-dress dude in the before doing, and the companion picture of the wretched old man in the after-doing, part of the Youthful Indiscretion ad.; but when Uncle Sam is made to command a fort composed of bottles of Hood's Sarsaparilla; or he is leading a bayonet charge with flying banners against Consumption, Scrofula, and Corns, his munitions being three free bottles of a notorious patent medicine—then we believe the American people should be given relief. This is making a painful burlesque of patriotism. Far better let us have a picture of Sampson each morning, with his promise of a battle tomorrow, or next day, or the day after that, than this prostituting of our American war feeling into a miserable trade catch-penny!

DIABETES MELLITUS TREATED WITH A MODERN REMEDY. RECOVERY.

By H. ETON, M. D., Brooklyn, N. Y.

IN April, 1897, J. L. L., forty-five years of age, cigar agent by occupation, asked me to "look him over," saying that he ate and drank fairly and seemed to have a good digestion, but that his food certainly was not benefiting him, as he felt tired nearly all the time, was troubled quite a great deal with thirst which was not much relieved by considerable draughts of cold water, and felt, as he described it, "much out of sorts." He also said that sexual inclination with him was much reduced. Inquiry developed the fact that he had to get up two or three times every night to void urine, and was at times much annoyed with an itching of the skin. A physical examination developed nothing of an abnormal character.

I at once suspected glycosuria: instructed him to save and forward to me his urine for twenty-four hours, and to report to me at stated intervals.

Right here I want to say that this man had for several years been under a most frightful strain, due to the fact that his daughter had been a victim to neurotic disorders proceeding from the womb and spine. She was troubled with night horrors, and often awoke him from a not too frequent rest with piercing screams, so that in addition to the natural nervous exhaustion due to paternal concern and natural affection for his much-afflicted child, he was deprived of even a fair amount of sleep.

With my knowledge of these facts I was fully prepared to diagnose the case as one of diabetes mellitus, of neurotic origin, and was not surprised when a urinalysis confirmed my suspicions.

The quantity was about 70 ounces, specific gravity 1041, and the glucose was slightly in excess of 7 per cent. The analysis gave no hint of error of diet.

With the idea of effecting an alterative systemic change as an initial step, I at once put the patient on 5-drop doses, *ter in die*, of mercauro, continuing with them for ten days. I made no change in the diet. At the expiration of ten days I stopped the mercauro and put the patient on arsenauro—never, from beginning to end, exceeding the dose of 5 drops three times daily. Before the conclusion of one month there was a gradual reduction in the annoying symptoms. There was a very fair increase in the patient's strength, a diminution of the bothersome itching, less nocturnal voiding of urine, and, in short, such a general degree of improvement that I was not surprised when the next analysis showed a reduction of more than one per cent. in the sugar. I kept him on the one remedy, arsenauro, for four months, and at the end of that period had the pleasure of determining the complete absence of glucose from his urine. I saw him a month ago, and he was in excellent health, so I certainly regard him as cured.

That *Critique* excursion will be a good one. Arrange promptly for the jaunt. You have no idea how these Denver "boys" are able to do the hospitable host.

TO OMAHA.

THE American Institute of Homeopathy, as the profession knows full well, meets in Omaha, with initial session on June 24. It is also well known that the Trans-Mississippi Exposition holds the boards during the same time and both before and after. This, added to the many attractions provided by the city and State for the general visitor, and the special provision for the Institute by the local profession, will make it an occasion which no member of the Institute can afford to miss. From all points in the West we learn that there will be large and important gatherings of the homeopathic clan, and that from these bodies of men and women many new acquisitions will be made to the ever-popular and representative American Institute. It is to be regretted that many of the Far Eastern members will not in all likelihood be in attendance. Their familiar forms and faces will be missed, but they will not be forgotten.

In this connection we call attention to the desirability of the membership getting together and being together on the road to Omaha, and while in Omaha, in order that much of the routine business of the Institute may be done informally, leaving nothing to do in the short hour of each morning's session but the affixing the seal of formality and legality upon the pre-determined work. If parties coming from the Middle States and the East will take the Nickel Plate trains, or their eastern connections, they will find themselves in good company, with a good (railway) company, and at rates less than upon any parallel line of railroad. This train service is the equal of any road in the United States: the time is equally good, the number of trains, the departure and arrival of trains, sleepers, dining-car, etc., all that could be asked. After reaching Chicago the Institute member will find that the Chicago, Milwaukee & St. Paul Railway will take him into Omaha as quickly, as safely, as cheaply, and as comfortably as any road running out of Chicago and into Omaha. Those traveling from the West and Southwest should not overlook the Atchison, Topeka & Santa Fe, which traverses almost all sections of this vast district. The equipment of this road is well known and needs no extended eulogy on our part. It may be well to say, without intended

offense to the Transportation Committee of the Institute, that there is no "official" route to or from the Institute at Omaha. The "Burlington" has, indeed, issued a circular bearing the names of the Institute's officials and giving promise of reduced rates. But, we are informed by other lines, this rate is the usual excursion rate of one fare plus two dollars; and that the promises held out by the circular will be met by any other road in that territory. At any rate, it will be well to examine the rates and conveniences of the roads we have named herein, and consequently recommend, before taking place in any "special" or "official route" train of any of the several roads to Omaha.

And, finally, in regard to hotel accommodations: It must not be forgotten that this is Exposition time, and that while the Local Committee has assured the Institute of abundant room for all who come, still the city may be so crowded with guests that the membership may have to break itself up into very small parties in order to be comfortably housed. It is very desirable that one or at most two of the principal hotels be made, not the headquarters of the Institute,—we still do not believe that this is the best policy,—but the rendezvous of the membership, in order to arrange for the business of the forthcoming meetings. The New Murray House, the Local Committee has assured us, is a first-class hotel in every regard, within a short distance of the meeting place, in a central part of the city, readily accessible to street-car traffic and near the principal business points. We take much pleasure on these assurances in recommending the New Murray to the Institute membership.

Reviews.

The *Century Magazine* for May is embellished with a handsome cover page in gold and colors, giving the "Ascent of the Enchanted Mesa." It is a beautiful bit of color work. In the body of the magazine the picture is followed by a readable article on this subject, by F. W. Hodge. This issue is also especially interesting in that it gives a story from the pen of General Wheeler, the former Confederate cavalry leader, who has recently donned the blue once more in

defense of "Old Glory." His story has reference to "An Effort to Rescue Jefferson Davis," "Railway Crossings in Europe and America," by Franklin B. Locke, is sadly to the discredit of America. Perhaps if our country were not so large, or if it had been under cultivation as many centuries as those of the compared-with European countries, our railway crossings and stations would show up equally well. Dr. Weir Mitchell still holds the interest of his widening circle of readers with his "Adventures of François."

Lippincott has "The Uncalled," a complete story, for May, with its customary assortment of other short stories and narratives. One of the best in the issue, aside from the story proper, is "No. 87,617 Colt." "The Election at Cayote," "People-in-Law," and "The Literature of Japan" are excellent. But this is scant praise, for there has never yet come to our table a dull *Lippincott*. Put the current *Lippincott* in the strap of your valise as you go journeying to Omaha, and we will go bail that you will have a good companion.

The *American Monthly Review of Reviews* continues to supply all that a busy doctor could ask for in the line of literature of the world. It gives in outline, and, frequently, in large draughts, the current literary mention of the intellectual world. A doctor, who has but little time to find for himself what he wishes to read, has but to browse through a few pages of this *Review* to find what he needs, note in what journal it occurs, then go either to his club or library, or purchase that special number, and have what he desires in a few moments and at comparatively little expense either in time or money. One of the most grateful features of the *Review* is its absolute impartiality. If we take up any current question, as dilated upon in the *Review*, we are sure to find it handled with justice and freedom. Take, for instance, the present Spanish crisis. It is rarely possible to get the truth from the daily press. There is so much effort to sell papers at the expense of truth that even many of the best metropolitan papers seem unable to resist the temptation to embody "news" in one issue which, either in the same number in some obscure corner, or next day, it

denies without a blush. But when the *Review* touches this subject it may be depended on for accuracy and fairness. It may be said that the *Review* is a belated news. Very well. But one must not forget Josh Billings' aphorism about learning so much that aint so. At the end of a week's newspaper reading, sum up sometime and note how little you know, notwithstanding you have read diligently column upon column of "news" in the morning or evening journal. Another good feature of the *Review* is that it does not occupy several pages of its issues with the blowing of horns—regarding its capacity for securing the only reliable war news or other form of news. Our advice to the busy professional man is to take the *American Monthly Review of Reviews* and keep posted.

St. Nicholas for May keeps the little folks busy as ever with its pretty stories and prettier pictures. "The Giant Baby" was an especially "fetching" poem. And no one ever yet knew Tudor Jenks to be prosy. "The Horrors of Heraldry" are (or is) well named. The puzzle department keeps the elders of the family, as well as the youngsters, guessing. But above and beyond all, *St. Nicholas* continues to be one of the CLEAN juvenile books of the age. It deals in travels and mysteries; but there is always a truthful and unexaggerated base for such stories, with a wholesome moral.

Globules.

Dr. Benjamin B. Kimmel has opened offices at 1846 Pearl Street, Cleveland.

Dr. David Duncan of Chicago has removed to Central Music Hall, Suite 26 and 27, and associated his son, Dr. A. B. Duncan, with him.

A bill has been introduced in the Maryland Legislature to prohibit the issuing of a marriage license to any person suffering from insanity, dipsomania, syphilis, or tuberculosis.

A Side Light on General Practice in England.—A correspondent comments thus on a case reported by another physician: "Dr. Purdon's letter in the *British Medical Journal* of April 23 is interesting from a point of view which may not be thought of by the consultant.

His patient informed him that one doctor had said the disease was lichen, while another said it was urticaria. She wanted a correct diagnosis. That is what many patients want from the general practitioner, to whom they expect to pay half a crown or less. Then they go to a chemist and ask for medicine for that disease, and remain under the chemist's treatment for months."

[This is one of the unpleasant possibilities of allopathic practice. A homeopath treats his patient, not the diagnosis.]

No appointments are made in the regular army except after examination by an army medical examining board, and all applicants must be graduates in medicine, and less than twenty-nine years of age. The Surgeon General of the Army has nothing to do with the appointment of medical officers for the volunteer army.

"Honors are Divided."—According to the *Canadian Pharmaceutical Journal and Gazette* for May, says the *New York Medical Journal*, "the American University of Tennessee, recognizing the scholarly attainments of Professor J. M. Munyon, has conferred upon him the distinguished and very honorable degree and title of Doctor of Laws." "Professor" Munyon, we believe, is the much-advertised purveyor of empirical remedies; what is the "American University of Tennessee"?

[We know nothing of the university, but we remember that once upon a time the advertisements had him—the said "Professor"—heralded as Doctor. The medical laws of most of the States made that title risky; hence, the "Professor." The daily press is now advertising and picturing a large handful of bottles, promising a sure cure for consumption—the handful to be sent FREE to anyone mentioning the paper. This philanthropic party takes unusual care never to sign himself M. D., but always M. C., in which, by a clever pen trick, he writes the C so that it will look like a D. He speaks, however, of the "Doctor ——— treatment," taking shelter under the legal quibble that there are doctors in other professions and walks of life besides the medical. This Doctor of Chemistry or Philosophy or Theology, when addressed for his FREE samples, accompanies the gift with a hatful of pamphlets picturing forth his laboratory filled

with inquiring students, male and female, as well as the usual laboratory furniture, charts, sketches, jawbones of an ass, and the like. The "Doctor" himself is doing the wall-eye act with his eyes, one thereof peering through a microscope, the other wide open, looking away from the instrument at the class. It is a most transparent quackery. Yet the medical man must not speak of it, lest he be accused of professional jealousy.]

The Minnesota State Homeopathic Institute, like the Indiana Institute, appears upon our table in programmes illustrated with photo-engravings of the officers and chairman. Both programmes are well filled with titles of papers, which we hope may have materialized in the reading.

At the recent session of the Homeopathic Medical Society of the State of Michigan, held at Grand Rapids, the following resolution was unanimously passed:

That a vote of confidence be given to the professors of the Homeopathic College at Ann Arbor, and that this society extend its congratulations to each and every one for their untiring efforts in the upbuilding of homeopathy at the University of Michigan.

The Detection of Renal Calculus by X-Rays.—Dr. Frederick Taylor and Dr. A. D. Fripp (*British Medical Journal*, April 30) recently communicated to the Clinical Society of London a case in which a Röntgen picture displayed the position of a renal calculus that had previously escaped detection by the lumbar exploratory operation. The stone was situated in an abnormally high position, and removal of part of the twelfth rib was necessary to effect its removal. It weighed half an ounce, and was surrounded by a cyst consisting partly of kidney pelvis and partly of atrophied kidney substance.

Dr. A. C. Wedge (*Railway Surgeon*) says that much of the surgeon's deliberation and coolness should be exercised before he begins his operation. There is not much hurry about beginning, but when he does begin he should go right along and finish as soon as possible. Celerity is a necessary qualification for the surgeon. Leaving out of consideration the question of

shock, and considering only the effect of the anæsthetic, it is important that the operation should be finished as soon as possible, so that the use of the anæsthetic may be discontinued, for during its administration the blood is being impoverished and poisoned, and after a certain time its continued use becomes dangerous.

Expert stenographers have been engaged for the Omaha session. Therefore be careful how you speak, for "there's a chiel amang ye takin notes, an' faith he'll prent 'em."

Concerning the best location in New England for a homeopathic physician to locate who has two thousand dollars to advance on a house centrally located, address: MRS. FLORENCE HOEY, Talbot Ave., Dorchester, Mass.

The Kentucky Homeopathic Society held its annual session recently in Frankfort, which was well attended and much good work done. The following officers were elected: President, Dr. H. S. Keller, Frankfort; vice president, Dr. E. B. Johns, Lexington; treasurer, Dr. J. C. Krickbaum, Danville; secretary, Dr. E. H. Griffith, Henderson. The next meeting will be held in Lexington.

In 1789 Hahnemann translated and annotated "The History of the Lives of Abelard and Heloise, comprising a period of eighty-four years, from 1079 to 1163, with their genuine letters from the collection of Ambroise: by Sir Joseph Barrington, Birmingham and London, 1787." Leipzig, 1789.

And now Hahnemann himself is in the same Cimetière du Père la Chaise where the tomb of Abelard and Heloise receives from disappointed lovers offerings to its shrine.

A medical journal, having recently referred to the author of "Hugh Wynne" as "the late Dr. Weir Mitchell," the distinguished neurologist, poet, and novelist of Philadelphia wrote to explain that he is still alive. Our contemporary duly published the letter, but was careful to put over it the following editorial note: "We do not hold ourselves responsible for the opinions of our correspondents." Able editors cannot be too cautious. Did not one Partridge, as far back as Queen Anne's day, have the impertinence to maintain that he was alive, although some

"eminent hands" had killed him in the journals of the day? For this disregard of fitness of things he was justly held up to the contempt of all right-thinking persons by Jonathan Swift.

Bring with you not only your dress-suit but also at least three new applicants for membership. As we build up the Institute so we build ourselves.

Remember the meeting of the American Institute of Homeopathy at Omaha, beginning June 24. You will miss a rare treat if you fail to pack up your belongings, or sufficient of them to be comfortable, and go to Omaha. Get away from your "shop" for two or three weeks, and you will come back to it refreshed, besides having learned a copybook full of new things.

"The Gynecologist: How to Avoid Him," by Dr. Benj. F. Bailey of Lincoln, as published in the *Medical Arena*, is an exceedingly clever paper and carries its point with neatness and dispatch. It is worth a second reading. His advice is to prevent the young girl from becoming a nervous wreck; to teach her the true duty of her nature, and to avoid raising her by a system of "Don'ts."

Talking about comfort and convenience, there is the Allison chair of Indianapolis. It is up to date for improvements. It is a very handy and easily adjusted implement of an office, and does not cumber the floor with a dead weight which will eventually tear the floor if it does not likewise strain your back or the integrity of Poupert's ligament. Look at the advertisement in our pages.

There seems to have been a fight among the allopathic doctors in California on their return from the annual meeting of their State Society, in which the lie passed several times, and finally blows were exchanged. Was it not this society which recently published to the California Legislature that the homeopaths were dying out and had accomplished nothing during all the years of their pretended existence?

To-day the State of Ohio is as nearly at peace, homeopathically considered, as ever before in its history. The wise and progressive reign of Dr. Geohegan as the State Society's president has healed the breach heretofore existent and

remented past differences, so that the meeting at Columbus adjourned upon a united profession. There seems to be no longer any inclination to make any open fight upon each other. The Cleveland School controversy did not appear in any way on the floor of the State Society meetings: members of the old faction appeared in discussion of each other's papers, and the most critical observer would have failed to note any friction. If this same spirit of tolerance of each other's shortcomings of the past could but be made a working motto in Cleveland, how happy and united all the profession would soon be! Why cannot the past be buried deeper than ever plummet sounded, never to be resurrected? These few men who still feel the old martial ardor, we are sure, need only to be approached by their ancient enemies in a spirit of kindness and peace to be caused to see the unwisdom of their continued, though buried, ill-feeling. Each in his own domain is eminently magnanimous.

Congenital Umbilical Hernia in the Newborn.—Dr. Hedman, Finska Läkaresälle Handlingar, has operated upon a case of congenital umbilical hernia in a newborn infant. The hernia was of the size of the little finger, and contained liver and small intestine, which could be seen through the transparent sac wall. Attempts at taxis proved that the abdominal cavity could contain the herniated organs. The little patient, who weighed 3600 g., was put under chloroform, and a needle with a silk ligature was passed through the skin elevation, and the silk was gradually tightened as the contents were returned to the abdomen. The umbilical vessels in the sac wall were separately ligatured. The hernial pouch was then cut off, and the wound closed with silk sutures. The operation, which lasted an hour and a half, was successful, but was followed by the development of a bilateral inguinal hernia.

Membranous Croup.—Dr. Newbery reviews the question as to the identity of membranous croup with diphtheria, and is inclined to decide in the negative. In treatment he advocates active and prompt measures, both general and local. The inhalation of moist medicated air is beneficial. A steam atomizer can be brought into requisition; or, when this is not at

hand, a dish of boiling water, so covered that the patient gets the benefit of the fumes, is of service. The medication used in the water may be bromine, iodine, compound tincture of benzoin, carbolic acid, acetic acid, or various other substances with a penetrating odor, the object being to reach and cause the exfoliation of the membranous deposit. The use of the inhalation of slacked lime occasionally produces good results. The writer, however, has had better results from the use of a spray in the throat with a good hand atomizer than with the inhalation of medicated air. The two remedies thus used are peroxide of hydrogen, diluted one-half, and permanganate of potash, one grain to the ounce. He has seen the exfoliation of large casts immediately after the free use of one of these remedies.

Post-Climacteric Hemorrhagic Endometritis.—Dr. Lockhart. — *Vermont Med. Month.*—Simple senile endometritis is the condition which most resembles corporeal carcinoma. In both the uterus will probably be enlarged; in both there may be cachexia, and you may have pain with both or neither. In carcinoma, however, the discharge is usually malodorous, there is fitful hemorrhage, more or less rapid loss of flesh, and no improvement on treatment. In endometritis, on the other hand the loss of blood is generally by steady oozing, thereby streaking the odorless mucoid discharge, and cachexia and loss of flesh are less marked, if present at all. The more children a woman has had the greater are the chances in favor of malignancy. In case of doubt the uterine cavity should be curetted and the tissue thus removed be examined by a competent pathologist. Even if pronounced benign, the malady should be watched carefully for several months. If hemorrhage returns after a second or, at most, third thorough curettage the disease is almost certainly malignant.

WIT AND WISDOM (a new department) see page X.

The American Homeopathist.

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The American Homeopathist.

NEW YORK, JULY 1, 1898.

FRANK KRAFT, M. D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



CHARLES A. ARMSTRONG, M. D.,
Kankakee, Ill.

AMERICAN TITLES:

THERE is a good deal of democracy at large in our profession. We note with much satisfaction that one of the annual programmes of a State society omits the "M. D." of all its printed participants.

* *

A HOSPITAL annual report comes minus the usual nauseating and meaningless "Esq.," the names being preceded with a simple "Mr." Right!

AN American doctor, who has no title except that conferred upon him after about eighteen months' medical "boning" and possibly "ponying," ought to be a little careful of its fragility. It might be put to the test some day and found exceedingly meaningless.

* *

AND that other doctor who is not satisfied even with his prominent parading of "M. D." but rubs it in with "A. M.," NOT earned, but conferred by his cherishing mother down the country for having been a good boy for ten or fifteen years, kept out of jail and paid whatsoever debts could not be legally evaded—that Master of Arts should put his title in a tin box, lay the said aforesaid tin box on the top shelf of the library—and absolutely forget it.

* *

AND what shall we say of the "H. M." and others of that ilk? Nothing! They are not worth mentioning.

* *

WHEN a man becomes an A. M. as the result of long study in some other walk of intellectual life, and then crowns the long life of study with the medical diploma—that man is entitled to the title, and has no reason to be fearful of obtaining money under false pretenses. But when a young man leaves the plow, or the anvil, or the carpenter's bench, or street-car motoring or conducting, or locomotive engineering, and takes the legal course in a legally constituted medical college,—that man while a doctor of medicine who in time may become the peer of the best in the profession,—that man should be chary of his titles. To him it gives merely a means of livelihood: to the other it is the crowning of a life of study and thought. A man who has taken his "medicine" in school, college, and university, and in time, as the result of complying with the studies and requirements of some accredited university, has earned his degrees of B. A. and eventually M. A.—that man is entitled to his honors and is justified in wearing them on his sleeve even in democratic America. And when in the course

of human events, after having produced works meet for honor, he is inducted into the LL.D. degree, we regard him all the more. But the heavens preserve us from the little country school A.Ms., many of whom cannot construct a legible, logical sentence in English, to say naught of Latin: who are not able to distinguish between a symphony and a sardine!

* *

WE like to hark back to the International Homeopathic Congress at London in 1896 and speak of the utter democracy which those Englishmen and other foreigners observed in their titular distinctions. And yet every American there knew, for it could not be hidden, that these English homeopaths, and their Continental brethren, are thoroughly educated in the arts and sciences, and *masters* of Medicine! Very few, we doubt if there were any, of the visitors of that Congress, Americans excepted, who were not masters of two and some of four languages.

* *

TITLES in America are an anomaly. They should not exist, except in the newspaper advertisements of the Three-Day-Cure Folks, the ministerial recommenders of Lydia Pinkham and Nervura, and that order of "gents." So we say, we like to find so many of our brethren who are really entitled to wear the blue-and-gold decoration of A. M. on the left breast of the rat tail coat on all state occasions quietly forgetting it, to be rediscovered by an aftercoming generation.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York

References in this department are made by number. See issue of January 1, or December 15, of each year.

Crocus Sat. IN INSANITY.—Dr. E. T. Adams of Toronto was persuaded to undertake the treatment by correspondence of Miss McS., aged twenty-seven, a school-teacher. Mental trouble, of five years' standing, had resisted all treatment her friends could secure. (She lived in a newly settled country.) Her condition varied between idiocy and attacks of acute mania, in which she several times injured herself and, on two occasions, her guardians.

"I undertook the case and never had more difficulty in obtaining information on which to prescribe. Finally I sent her a dose of nux vom.^{3c} (K) and sac lac., in quantity sufficient.

This benefited her general health to some extent, and so she went on for weeks; I trying to get the required information, they trying to send it, and both failing. Finally, when on the point of confessing that I could do nothing further, the sister who acted as my correspondent mentioned that the patient's menstrual flow was black and stringy; a ray of light, but not enough to warrant a prescription. So I wrote inquiring as to the effect music had on the patient. The reply was a fragmentary proving of *crocus sat.*, that she would, when in her quiet, stupid state, sing or croon to herself by the hour; that singing exerted more control over her than anything else, even when wild and dangerous. Often in the middle of the night she would sing so loudly as to wake the family; then she never heard singing but she would start and join or else go it alone in opposition, according to the state she was in. Eureka! I exclaimed and sent her a dose of *crocus sat.*[™] (F. K).

"Every two weeks I had a report and each better than the last, first becoming more gentle, than outbursts less violent and less frequent, then beginning to take interest in visitors. Next, began to join in conversation and show that she understood and appreciated the subjects spoken of; and so it went on until, in about three months, she was herself again—an object of wonder to all who saw or knew of her. This was about eight months ago; there has never been the slightest relapse, she is well mentally and physically, she enjoys life and is a subject for rejoicing to all who come in contact with her. The last complaint I had was that it was impossible to keep her from working, but in reply to question as to its effect on her, they write that she enjoys it and it agrees with her. Under these conditions I advised that they let her work. After the summer holidays she returns to her school-teaching."

Iris Versicolor 2x IN DIABETES MELLITUS.—Dr. E. Baruch:—Mr. J. B., age thirty-six years, single, merchant. Duration several years. Pathogenetic symptoms: Mind low-spirited, dullness of mental faculties. Dull, throbbing supra-orbital pains, chiefly on the right side, with nausea, sometimes vomiting in the morning. Eructations, anorexia, urine pale and copious. Clinical symptoms:

Burning in the pancreas. Urine of increased specific gravity and containing sugar. Feeling of tiredness and exhaustion and weakness of lower limbs. Remarks: Treated by various physicians. Pronounced hopeless by last medical adviser. Symptoms began to disappear and sugar to decrease within the first week. After suspending the remedy for two weeks the symptoms and sugar began to reappear. Disappeared again on re-administration of drug, which was continued for eight weeks. Ten months have since elapsed without the slightest observation of diet, and no symptoms have returned.

Arsenicum^{cm} FOR ASTHMA.—Dr. W. W. Gleason:⁴—Nineteen years' duration. She has for many years smoked and inhaled every quack nostrum to be obtained. Asthma is brought on by raising arms above head, or by physical exertion. Has not missed having asthma a single night for years. Sour taste in mouth. Lips blue, dry. Mouth dry. Severe cough, expectoration being white, frothy. Wakes after an hour's sleep at night with asthma. Constipation so severe has not had operation of bowels for ten years without physic. Fæces in small jagged lumps. Urging constantly day and night to urinate, must strain to pass urine. After voiding urine sensation as if some remained in passage, which causes tenesmus. Circumscribed redness of cheeks. Aching in forehead in afternoon and night. Darting pains as if needles in eyeballs. Darting pains through right chest on drawing a deep breath. Tired, weary all time. November 12, 1897, she received two powders of arsen.^{cm} and improvement commenced, no more medicine being needed. She has had no more asthma.

Oxalic Acid on Corks.—The following item³⁷ suggests the importance to a homeopath of securing properly treated corks for his potencies:

O. Wentzky states that recently he detected the presence of quite an appreciable quantity of oxalic acid on a lot of corks just received by him. On inquiring of the manufacturers as to the cause of the presence of this acid he was informed that its use in the manufacture of corks was quite common, and that the excess noted in this particular lot was due to the fact that the workman had used an excess of oxalic

acid. The same author had observed the presence of oxalic acid in corks coming from another manufacturer, although in this case the quantity was not so large. It is stated that the acid is used to free the cork from tannate of iron, which is formed by treating the corks with ferrous sulphate for the purpose of removing the excess of tannin on their surface.

Acetate of Thallium IN THE NOCTURNAL SWEATS OF PHTHISIS.³⁷—At the meeting of the Academy of Medicine held on February 22, Professor Combemale of Lille mentioned that he had administered this drug in the form of pills of 10 centigrams in cases of excessive sweating. In thirty patients, either tuberculous or affected with some other disease, who suffered from profuse nocturnal sweats, one only was not at all benefited and one other was slightly relieved without being completely cured. Those patients who suffered from large cavities and were very cachectic were most benefited, for contrary to other antisudorifics the acetate of thallium produces its greatest effect in very cachectic patients, and those suffering from leucocythæmia are also much benefited. In old cases of tubercle which are drying up, or in those in which softening is just beginning, the drug has not the least effect. Old cases of bronchial dilatation and of chronic bronchitis, which suffer from sweating as much as tuberculous patients do, also derive benefit from the acetate of thallium. The daily dose is from 10 centigrams up to, in some cases, 20 centigrams. It must not be given for more than four days in succession, for its effects are very lasting and persist for from eight to ten days, but refractory cases show no improvement even after eight days. The drug ought to be given about an hour before the time when the profuse sweating generally begins. In three cases complete alopecia followed the use of the drug. In from two to eight days the patients lost all their hair, but it is to be remembered that they had already begun to lose their hair and had taken from 80 to 110 centigrams of acetate of thallium in the course of a month. On the other hand, tuberculous patients under the same conditions whose sweating had been arrested by two doses did not suffer from this sudden loss of hair. Professor Combemale

concluded that this accident need not be feared except after prolonged use of the drug or too frequent doses.

Carbolic Acid IN TYPHOID FEVER.—Dr. Gerald Williams³⁷ of Vernon, British Columbia, makes the following report, in which a dose of carbolic acid, of decidedly unhomeopathic proportions, apparently cured a case of typhoid:

Last autumn I attended a case of typhoid fever—a typical case with rash, hemorrhages, and diarrhea. The patient recovered in twenty-seven days. Ten days after the temperature had been normal both morning and evening he relapsed. His temperature at the end of the first week was 106° F. in the evening for two days. He had two hemorrhages and distressing diarrhea. On the fourteenth day of the relapse I saw him at 9 P. M., and as the diarrhea was excessive I prescribed for him accordingly. The temperature was then 104.5°; the pulse was 90. At midnight his brother, who was nursing him, came for me in a great hurry. He told me that he had given him two tablespoonfuls of pure carbolic acid in mistake for the diarrhea mixture. I hurried as quickly as possible to his house. Fifteen minutes must have elapsed from the time of taking the poison to my arrival. I took a quart of saccharate of lime and my bag with a few drugs. When I arrived the patient was trying to vomit by putting his fist down his throat, but as yet had not succeeded; before I arrived he had “drunk about a quart of milk.” He was very much frightened, his mouth was terribly burnt, his lips were perfectly white, and he complained of great pain in the stomach; he was not at all collapsed. I made him drink a quart of saccharate of lime and administered one-tenth of a grain of apomorphine hypodermically. He vomited in about one minute. I then gave him salad oil and sulphate of soda. He vomited several times more, the vomited matter on the last occasion being almost free from the smell of carbolic acid. He then fell back in bed completely collapsed. The pulse was hard to find and respiration was labored. I injected brandy and ether sulphureous hypodermically. He was quickly recovered; in two hours from the time I arrived I left him. I saw him at 8 A. M. next morning, and was very much surprised to find

him looking and feeling very much better than before he took the acid. He only complained of his throat and slight pain in his stomach. His temperature was normal. The pulse was 96. He never had any return of fever, and in a week was out of bed. When his mouth healed he had nothing to complain of at all. In my mind this is a clear case of cure by carbolic acid, but I should not care to try quite such a big dose.

CEREBRAL LEPTO-MENINGITIS.*

By P. DOUGLAS SMITH, M. B., C. M., EDIN.

MY object in selecting as the subject for this paper the disease, or diseases, known as “cerebral lepto-meningitis” is that I may raise certain points in regard to surgical and medicinal treatment, and to a less extent in regard to diagnosis and prognosis of the disease in question. I shall have also to bring before you some illustrative cases, one having arisen and come to a favorable issue while I have been engaged in writing upon the subject.

With the general anatomy of the parts concerned we are all acquainted. There are a few points in this connection which have an important bearing upon the course of the disease and upon its treatment, which it is necessary to keep in mind. The position of the cranial nerves at the base of the brain, and of the motor areas in the cortical convolutions, is of importance in respect of diagnosis. The communication between the sub-arachnoid space and the ventricles of the brain by the foramen of Magendie, also between the spinal and cranial portions of the sub-arachnoid space, is of importance in relation to treatment.

All three of the membranes of the spinal cord and the brain are subject from various causes to a process of inflammation, the group of affections so resulting being termed “meningitis.”

With affections of the spinal meninges, and of the cerebral dura mater, I wish to have nothing to do at present.

Epidemic cerebro-spinal meningitis belongs properly to the specific fevers, and stands so by itself that it may at present be left out of con-

*Presented to the Liverpool Branch, *Journal of the British Homoeopathic Society*.

sideration. I wish, therefore, to confine my remarks to "acute cerebral lepto-meningitis," the chronic form of the disease being unimportant because of its great rarity.

Ætiology.

This disease may arise :

Firstly, and most commonly, as a result of the eruption of tubercles, usually in the basal meninges, being then called tuberculous, or basilar, meningitis.

Secondly, complicating certain acute general diseases, especially pneumonia, also smallpox, typhoid fever, rheumatic fever, whooping-cough, scarlet fever, measles, erysipelas, septicæmia, and pyæmia.

Thirdly, directly or indirectly consequent upon injury to or disease of the cranial bones, especially the petrous portion of the temporal bone.

Fourthly, in certain constitutional conditions, such as Bright's disease and, rarely, gout.

Fifthly, we must recognize an idiopathic lepto-meningitis infantum, in which there is no discoverable cause.

Morbid Anatomy.

In tuberculous meningitis the basal meninges are mostly involved. There may be a great amount of exudation, the sub-arachnoid space being filled with a turbid fibrino-purulent fluid, which covers the structures at the base of the brain, and may extend at times over the surface of the brain to the vertex. There may, on the other hand, be merely a slight matting and turbidity of the membranes, with a slight amount of serous infiltration. The tubercles may be manifest as small grayish-white nodules throughout the membranes, more or less abundant, there being no relation between the number of tubercles and the amount of fluid exudation. At times the tubercles are very hard to find, and can only be discovered after carefully withdrawing and searching the arteries of the anterior and posterior perforated spaces. The tubercle bacillus is usually demonstrable in the tubercles and in the fluid exudate.

In the non-tuberculous forms of the disease the cortical or basal meninges may be involved. The general appearances are much the same, but there are no tubercles, and the fluid is more apt to be purulent.

In both varieties the condition affects the contiguous cerebral substance, so that the condition is in reality a meningo-cerebritis.

In both varieties, also, the disease spreads to the ventricles of the brain, resulting in ependymitis, with consequent exudation and hydrocephalus.

Careful *post-mortem* examination will reveal, in almost all cases of tuberculous meningitis, that the meningeal affection is secondary, there being a primary focus of the disease in some other organ or tissue.

Symptoms.

The symptoms of acute meningitis vary considerably according to the amount of fluid in the ventricles, the amount of central softening accompanying the inflammation of the meninges, and the intensity and locality of the inflammatory process itself. In basilar meningitis the cranial nerves may be markedly affected. If the vertex is involved there may be many symptoms arising from involvement of the motor areas.

The course of the disease is usually divided into stages, which, however, are often very badly marked off from each other.

There may, or may not be, a prodromal stage, during which the child is irritable, peevish, and in failing health generally, but at this time the disease is not recognizable.

The first, or irritative, stage is usually ushered in either by a convulsion, or by severe headache, vomiting, and sudden access of fever. The patient may scream loudly, or may wail and moan without cessation, often waking up in sudden terror, and being subject to illusions of various kinds. There are, as a rule, great restlessness and muscular twitchings, etc. The pulse is at first rapid, but then may become slower, and remain so till shortly before death. The temperature may rise to 103° or 104° F., or even as high as 106°, being usually higher in non-tuberculous cases. The bowels are constipated as a rule, but not always. The pupils are often contracted, but may be unequal, natural, or even in this stage dilated, the ocular symptoms all through being very inconstant.

The second stage, or stage of compression, is marked by subsidence of the irritative symptoms, and the advent of a less distressing but

much more ominous condition of apathy and stupor. The abdomen is retracted, and the bowels constipated. Pupils usually dilated or irregular. Respiration sighing. There are commonly a retraction and rigidity of the neck, and may be convulsions or rigidity of the muscles of one side or limb. Optic neuritis may develop, and very rarely tubercles may be detected in the choroid. Erythema or urticaria may sometimes occur. The temperature is maintained at a lower level—100° to 102° or 103° F. When roused from his stupor the patient is somewhat delirious.

The final, or paralytic stage, is characterized by increasing coma, with rapid, feeble pulse, going on to complete paralysis. Death may then occur from gradual heart failure, or the patient may be asphyxiated during a convulsion.

The duration of the disease is usually two to four weeks in the tuberculous variety. The non-tuberculous forms are more violent and rapid, and death may take place even within two or three days of the onset of acute symptoms.

Diagnosis.

Diagnosis of meningitis is usually easy, and must be made in accordance with the totality and the grouping of the symptoms, due regard being had for the ætiological factors discoverable. Due care will in this way separate meningitis from typhoid fever, and from other intracranial affections.

Sometimes, however, difficulties may present themselves, especially when complicating pneumonia or typhoid fever, where identical symptoms may result from meningeal congestion.

Diagnosis between the tuberculous and non-tuberculous varieties is often impossible *ante mortem*. It must be borne in mind that tuberculous meningitis is common, whereas the other forms are rare indeed. Involvement of the base, indicated by affections of the cranial nerves, and often by optic neuritis, is in favor of the disease being tuberculous.

If a cause can be traced, *e. g.*, purulent otorrhœa, this will obviously be of great assistance.

It has been suggested and practiced to diagnose by means of lumbar puncture with a hypodermic needle, and withdrawal and examination of the fluid exudate. I should not feel justified in

using this method, even if it were reliable and accurate.

Prognosis.

It is still debated by some authorities whether meningitis can recover, or be cured; though I think no homeopath would waste two thoughts on such a question.

The mortality is, however, large, even with the most careful homeopathic treatment, and the cause is not far to seek. The parts attacked are of great importance and extreme delicacy. Moreover, in the vast majority of cases, there is an underlying constitutional condition of the utmost gravity and most difficult of treatment.

My own small experience of general practice has, I should presume, been unduly favorable. I have treated three cases, and watched two others, all undoubted meningitis.

One of my own cases died; the other four all recovered.

The general conclusion seems to be that the prognosis is always grave, more so in tuberculous cases, and that the gravity increases as the stage of irritation gives way to that of compression. But even when compression is fully established there is no need to regard the case as absolutely hopeless.

Treatment.

Dietetic treatment is regulated by common sense, milk being given in small quantities frequently. General treatment may be of some importance. The patient should be kept, as far as possible, at perfect rest and quiet.

The whole paraphernalia of purges, leeches, blisters, thermocautery, etc., may be at once discarded as cruel and worse than useless.

The head may be shaved and an ice cap applied, which must not be expected in any way to control the inflammatory process, but may give some relief if the headache be severe. It is very difficult to keep the ice cap applied on account of the great restlessness of the patient, and I do not think we should be dependent upon such accessories.

If the fever is very high, sponging may be resorted to in the usual way. This can do no possible harm, and often gives great comfort; at least temporarily. Surgical treatment has been practiced both for the purpose of direct

medication and in order to prevent or relieve cerebral compression.

Direct medication may be effected, as proposed, by means of lumbar puncture with a hypodermic needle, the medicament being injected slowly and allowed to flow up and out through a trephine hole in the vertex. It has been suggested to use iodoform and sodium salicylate in this way. This operation is essentially wrong in principle, and one could expect nothing but mischief to result from it. Even if there were a gleam of hope in it, it would not be justifiable except in the absence of safer, simpler, and more efficacious methods.

For relief of cerebral compression, the operation of trephining and draining the subdural space has been practiced. The various sites recommended for the operation are the cerebellar fossa of the occipital bone and the cervical and lumbar portions of the vertebral column. The two latter sites seem open to two objections. First, they are apt to be inefficacious in consequence of closure by inflammatory deposit of the communication between the cerebral and spinal spaces. Second, where this is not so, it would seem at least undesirable to drain a quantity of unhealthy, possibly purulent, fluid over the healthy spinal meninges.

This operation stands on an entirely different footing from the one previously mentioned, in that there is no introduction of pernicious substances, its object being merely the mechanical relief of cerebral compression. It seems open to one objection, namely, that it disturbs the course of the symptoms, without altering the nature of the disease. If, then, as consistent homeopathic therapists, we rely upon the symptoms as our guide in drug selection, we have this difficulty to face. By disguising the symptoms we deprive ourselves of the means of accurately selecting the remedies requisite for the cure of the disease. By acting as surgeons we deprive ourselves to a certain extent of the ability to act as therapists. On the other hand, it may with justice be urged that by this means the immediate cause of death may often be removed and the patient's life prolonged, if not saved. Thus valuable time is gained, during which we can continue our medicinal treatment.

I have had no personal experience of the

operation, but if a case seemed to be going to the bad in spite of my best efforts, and if I had reason to regard it as hopeless or nearly so, I should feel justified in trephining in the cerebellar fossa.

The operation of trephining would seem to be more hopeful in cases where middle ear disease causes a limited meningo-cerebritis which can in any way be localized. The spread of the inflammation may thus be checked, the disease products be drained away, and the case left open for treatment.

In regard to internal medication, if we consult our friends of the allopathic school, we receive only the melancholy assurance that "there are no remedies which in any way control the course of acute meningitis," but that the bowels should be kept open, and mercury and the iodide and bromide of potassium administered.

We know, however, that there are a large number of remedies which do control the course of the disease, which enable us to cure a great many cases of meningitis which otherwise would certainly prove fatal. Indeed, our very abundance in this respect is a cause of difficulty to us, for with such a host of similars the selection of the most similar to any given case becomes a delicate and laborious undertaking. And if there is a wealth of remedies on the one hand, it cannot be denied that on the other hand the disease itself presents an unusual variety of remarkable symptoms. This being the case, the only method from which, as far as I know, success can be expected or deserved is to make a careful and patient study of each case as it comes under our care. We may be stimulated to this by the knowledge that the utmost care and most exact discrimination on our part will scarcely suffice to preserve the life of one suffering from this fatal disease. All the facts ascertainable in each case should be collected and carefully weighed over side by side with our drug pathogenesis, before we venture to administer any medicine at all. I remember finding it of great advantage, in one case, to sit by the little patient's bed for an hour and more at a time, observing and noting the occurrence of valuable symptoms, which would otherwise have escaped my knowledge. I am convinced that such practice as the systematic administration

of hellebore, for no other reason than that the child suffers from meningitis, would be unworthy of any homeopathic therapist, and, in the vast majority of cases, powerless for good to our patients.

While in this, as in most other things, there is no royal road, there are, I think, a few considerations which may serve as guides to us in a general way, without relieving us of the responsibility in each case of carefully differentiating before we select. Ætiology may afford us important indication of the direction in which we are to look for a remedy.

If there be a distinct history of traumatism, arnica is likely to be indicated; or hepar sulph. for traumatic meningitis in children, with spasms. Meningitis, the result of suppressed eruption, will often require apis, belladonna, bryonia, mercurius, phosphorus, or rhus tox.

If a suppressed otorrhœa be the cause, pulsatilla or sulphur will frequently be indicated.

Most especially must we take note of the grave constitutional taint which underlies the vast majority of cases, notably the tuberculous cases, and of which the meningitis is merely a local manifestation. Thus we may persevere with such favorite remedies as belladonna, bryonia, hellebore, apis, etc., and meet with disappointment over and over again, in spite of the apparent homeopathicity of our remedies. The fact in such cases would be that our drugs are not equal to the disease; their action is not deep enough. The two powers are pitted one against the other, and the disease power proves the stronger. We must remember that usually it is not merely meningitis we are called upon to treat, but tuberculosis. We should therefore search patiently for a similimum among the antipsorics, or, if the term be objected to, among remedies with a profound and far-reaching action, which shall be capable of reaching as deep as the disease and extirpating it by the roots. We must not be content, like Homœœa, to touch the spot; but must consider whence that spot originates, and destroy the *fons et origo mali*.

Such remedies as I refer to, from which we may expect great benefit, are arsenic, calcarea, cuprum, iodum, lycopodium, silica, sulphur, and zinc; also natrum mur. and, it is said, psorinum: possibly sometimes tuberculinum. Most of these

remedies will be often found to be homeopathically indicated, and, presuming their suitability, will be far more powerful for the good than those whose action is less profound. It is not my wish to cast a slur upon the other remedies: they are indispensable as intercurrents but can seldom cure the disease by themselves. I believe that if these facts be kept in mind, we shall be frequently saved from disappointment and our patients from death.

We shall find also that, apart from ætiology, a knowledge of the clinical course of the disease will stand us in good stead. Thus by careful watching we shall be able to detect the earliest threatening of compression symptoms, and to prevent their onset by the exhibition of suitable remedies; our treatment being in such cases prophylactic to a certain extent as well as curative. Of course the different stages of the disease present different symptoms, and demand different remedies in accordance. Thus, for the earliest incipience, aconite is often called for, especially in non-tuberculous cases, and will frequently be best followed by belladonna, then apis, then hellebore, or sulphur, etc., or by bryonia, then sulphur.

If remedies be given in improper sequence, then, of course, mischief will result. To follow apis by rhus would be a great mistake; to follow apis by sulphur would be excellent, presuming the indication. Apart from the question of medicinal treatment, or only indirectly affecting it, there is one error which we shall be preserved from by the exercise of reasonable care, which will be best illustrated by an actual case. Upon the subsidence of the irritative symptoms, deceived by the temporary lull which often then takes place, a doctor declared the case cured, and actually left off attending. Compression symptoms then appeared, another medical man was called in, and the child died.

Here are four cases by way of illustration; some of them seem to present peculiar and interesting characteristics:

Case I. was a little girl, three years of age, who had suffered for six weeks from purulent otorrhœa consequent upon an attack of measles. A blow upon the head the day before the onset of acute symptoms, seems to have been the exciting cause of the meningitis. The attack was

unusually acute and violent, and the temperature was very remarkable, oscillating daily between 104° and 106° in the morning and normal at night. In connection with the eyes, I observed that there was a constant rhythmical contraction and dilatation of the pupils, the variation being between extreme dilatation and pin-point contraction, and occurring about six times a minute. This symptom is recorded by Quain, in a case of tuberculous meningitis, but seems to be rare. It is not, as far as I can find, recorded of any drug, but seems certainly to correspond to the genius of lycopodium, being similar to many symptoms of that drug in various parts of the body, in which contraction and dilatation occur in the same rhythmical manner.

April 26.—Aconite was the first drug administered, but was scarcely appropriate, it being the third day of the disease.

April 27.—Belladonna was then given upon the usual well-known indications the second day. On this day the above-mentioned peculiarity of the pupils was first noted, and the temperature rose to 106° at noon.

April 28.—The following day the otorrhœa was re-established, the temperature 104.6° at noon, and some slight improvement noted. The tongue was coated with a clear red strip in the center. Veratrum viride was given, which I consider was a mistake.

April 29.—Next day the temperature rose to 105.6° , and the child seemed worse. Belladonna was again given, being indicated by violent throbbing of carotids, great heat, and redness of head and face, with many other symptoms.

The evening of the same day lycopodium was given, indicated especially by the condition of the pupils above referred to, the same kind of motion of the *alæ nasi*, and a vast deposit of urates in the urine. The result was a general improvement in the condition of the patient, disappearance of the symptoms mentioned, and a change in the type of the disease, the morning aggravations and evening remissions both becoming less marked.

May 1.—After two days' bronchitis, with a troublesome cough having appeared, the child developed an intense antipathy to the least motion. Bryonia seemed indicated, and was given

for three days, with marked benefit to the cough and the general condition.

May 4.—The temperature did not rise above 99.2° . Apis was called for, by the irritable, cross temper of the patient, by sudden throwing out of an arm during sleep, and by sudden, sharp, short cry during sleep. Apis was continued six days, the child improving nicely.

Subsequent administration of calcarea and lycopodium was followed by cessation of the otorrhœa. The child has been in excellent health since.

Case II. was not under my own treatment, except to a small extent. The patient was a strumous, badly nourished boy, aged nine years. The illness began with headache, vomiting, diarrhea, and abdominal pain and tenderness, closely simulating enteric fever. The typical symptoms of meningitis soon supervened, the lungs became much congested, four tuberculous abscesses appeared in various parts of the body, and pericarditis appeared, with considerable effusion. All these, combined with the terribly depraved state of nutrition, combined to make the case almost hopeless. I regard the nature of the case as "acute general tuberculosis," affecting the intestines, the meninges, the pericardium, the cellular tissues, and possibly also the lungs.

I cannot enter into details as to the treatment, but the remedies from which most benefit was obtained were arsenic, hellebore, iodine, belladonna, lachesis, apis, and subsequently silica. The boy is now quite well.

Case III. was very similar to case I., but less violent. The sequence of remedies was bryonia, hellebore, sulphur, and iodine. The first three cured the meningitis and some bronchitis which complicated it, hellebore and sulphur especially having a marked effect. Iodine is now greatly improving the boy's general health. In this case I noted a peculiar symptom of hellebore, namely, one small, dark, mucous stool every day.

Case IV. is a girl, aged eight years, and illustrates a point not referred to as yet. She suffered some years ago from meningitis, and now from chronic dementia, as a result of it. If her hands are left free she cries for them to be tied behind her back, and continually strikes herself about the face and ears, bruising herself considerably. When the hands are tied she

frequently strikes her head gently against a table or anything else which may be convenient. My own impression is that there must be remaining a chronic meningitis with slight cerebral compression.

In the first three cases mentioned all the remedies except lachesis were given in the potencies between one and four, which, I should like to remark, does not represent my convictions on the subject. But whether with high or low potencies, I shall perhaps not be wrong in saying that with due care we might be able to save a majority of the cases of meningitis that come under our treatment, or at least amply to demonstrate the curability of the disease, which is so much called in question.

CHALK TALKS.

THE effort of Professor Richey Horner at Columbus, and which proved so eminently successful, in giving a general practitioner audience a neurological lecture that will stay by them, was made the success it proved by the skillful interweaving of pictures, talk, and lecture. To us this has seemed for a long time the secret of all teaching, and one which ought to be more closely followed out. Another exceedingly dry and wearisome subject is that of *materia medica*. Yet there has never appeared to be any need for dryness. When we consider that *materia medica* comes from all the kingdoms, both natural and political, it would seem that a good teacher, who was something more than a mere reader of symptoms copied from Farrington or Hering, would find no trouble to keep his subject warm and alive. There is not a well-proven remedy in the books that will not admit of something that may be put on the blackboard or on paper for the class or the student to look at—to visualize and memorize. That which we see becomes more firmly fastened in our memories than that which we but hear. This is not a chimerical idea. It has been in great part put in execution in the Cleveland school in several chairs, and the classes have never grown tired or gone to sleep when that form of chalk talk was indulged in either in the *materia medica* or the other hours. The successful lecture of the future will be the illustrated lecture.

Pil. No. 50.

New York Medical Times:

My reasons for having devoted myself to such work [conservative surgery of the uterine appendages] are:

That I believe that no surgeon can anticipate just what effect an early induction of the menopause by ovariectomy will have upon a woman's nervous system. Some it will affect in one way, some in another; some will put on flesh, some will lose it; some will be cheerful and contented, others will be melancholy. In many cases the domestic relations are destroyed by the knowledge of the husband or wife that she is not a perfect woman, and that what every woman should have preserved, if possible, she has been deprived of.

They all suffer more or less from hot flashes, and in many cases the latter become a very troublesome condition, the heart palpitation and hot flash creating a constant fear of future evil. Many times in the past I have had my patients return to me and complain that these nervous symptoms were dreaded much more than the condition for which I did the operation, while expressing a regret that they had ever undergone the same.—*A. Palmer Dudley.*

The New York Medical Journal:

THE RIGHT TO PRACTICE.—The New York State legislature has a bill before it to open the door to the quackery of osteopathy, while, on the other hand, there is on its statute book a law which prevents physicians of good standing and reputation from beginning practice within its borders without submitting to re-examination, no matter how reputable their diplomas or how distinguished themselves in their craft. Now the *principle* of a community protecting itself against incompetent practitioners by the imposition of a State examination is a good one, for it does not at all follow that the owner of a diploma granted many years ago is a competent practitioner at the present day, to say nothing of the fact that there are diplomas and diplomas. But, in our judgment, the examination ought to be purely technical—viz., in medicine, surgery, and obstetrics, including a reasonable elementary knowledge of their well-established special sub-

divisions—*e. g.*, dermatology, ophthalmology, laryngology, gynecology, and *surgical* anatomy. Ordinary descriptive anatomy, chemistry, and so forth, which are very proper requirements for the training of a student, are totally unsuitable for an examination of this character, the subjects of which should be such only as every ordinary practitioner is expected to be familiar with for his own practical work, and the reading up of which, should he find himself a little "rusty" therein, is in the direct line of his daily round. We suspect that it would not be a very difficult matter to frame an examination, and that without transcending the ordinary limits of what would be fair to a body of students seeking their diplomas, which should effectually exclude such men as Dr. Nicholas Senn, Dr. Howard Kelly, Dr. William Osler, and most others of "light and leading" from the right to practice in this State of New York, unless they dropped their present useful careers for a while and went to school again.

[Also such practical medical and surgical giants as Helmuth, T. F. Allen, St. Clair Smith, E. H. Porter, Asa Couch, A. R. Wright, and a few others.—ED.]

SUCCESSFUL CASE OF PORRO'S OPERATION IN A DWARF.

By SMALLWOOD SAVAGE, M. A., Birmingham.

A WOMAN, aged twenty-three and a half years, was sent by Dr. Baddeley, who in view of an approaching full-term pregnancy had considered there would be a good deal of difficulty in delivery. The patient's father and mother were healthy and well-formed. She was the second of a family of five children all of whom, with this one exception, were of average height, and merit no further mention. The patient when born was considered unusually small and "when one year old was no bigger than her newly-born sister." As an infant she was very weakly and had not sufficient strength to suck properly. She was brought up by the bottle with sago and rusks, but never had any of the patent food. She cut her teeth naturally; as to walking, she did not begin until she was three years old, and while at school she was

much behind other girls of her own age. There was history of fits.

On examination the patient's height was found to be only 4 ft. 3 in. and her weight 7 st. 2 lb. Her face was small, but it presented an old appearance. There was no alteration in the shape of the bones of her skull or limbs, nor were there any enlarged ends of long bones. The patient had not a prominent forehead. Her teeth, however, were carious, especially in the upper jaw, for there she wore a plate. The pelvis was small; of the external measurements the intercrural was only 9 in., the interspinous only 8 in., and the external conjugate $7\frac{1}{2}$ in. There were no signs of congenital syphilis. Mentally the patient seemed below the average. The usual signs of pregnancy were present, the uterus extending up to $1\frac{1}{2}$ in. of the sternum. The fetal head, which was of average size, was felt entirely above the pelvic brim and it was impossible to make it engage it. On auscultation both souffle and fetal heart were heard. By the vagina the pubic arch was found to be very considerably contracted. The diagonal conjugate diameter was not made out. The pelvis generally was a good type of the "small round pelvis." In view of the size of the child's head compared with that of the pelvis, it was considered that the chances of a living child being born naturally were very remote. After due consideration of all the facts it was decided to advise delivery by Porro's operation or Cæsarean section, the former being chosen.

On Nov. 27, 1897, the patient was operated on in my father's private hospital, Mr. J. Sandison Crabbe administering the anæsthetic and my father assisting me at the operation. The incision was made five inches long in the middle line, one-third of it being above and two-thirds below the umbilicus. On the uterus being exposed an attempt was made to encircle it with an elastic tourniquet; this was impracticable, so the abdominal incision was slightly enlarged above and the uterus brought out above the surface of the abdomen. The elastic tourniquet was now applied below the head and both appendages and there temporarily fixed by forceps. Three large flat sponges were placed in the abdomen, covering the remaining viscera. The placental site was felt for but could not be

made out. The uterus was incised for about five inches along the anterior surface, but as this was found to be over the placenta another incision was made to the left. The membranes were ruptured and the child was quickly extracted by its neck. Before rupturing the membranes the uterus was strongly anteverted so as to allow of the uterine contents being delivered well away from the peritoneal cavity and between the mother's thighs. The clamp was next applied with a protected transfixing pin, and the uterus was amputated. The abdomen was stitched up in the ordinary way, care being taken that the stump was firmly fixed in the lower angle of the wound. It might be noted that not a drop of blood or amniotic fluid entered the abdominal cavity. The child breathed well and seemed to be well-formed and of average size. The patient made an uninterrupted recovery without any untoward symptom. The clamp came away on the fifteenth day, and she was discharged on Jan. 5, 1898.

PORRO'S OPERATION PERFORMED FOR IMPACTED PELVIC TUMORS.

By MAYO ROBSON, F. R. C. S., Professor of Surgery in the
Yorkshire College of the Victoria University.

THE following case of Porro's operation for obstruction produced by tumors presents so many points for consideration that a report may, I trust, prove of interest to the profession:

CASE I.—A. W., 24, had always enjoyed good health, began to menstruate when 15, and had been quite regular. She was married in November, 1895. A fortnight after, and following on a menstrual period, she was seized with sudden and violent pain in the lower part of the abdomen, chiefly at the left side. Under rest and treatment this subsided in two or three weeks, and she had had no illness since, menstruating regularly, the last period on May 2, 1896. She had a slight appearance of menses on August 21 following, but it only lasted two days, since which she had seen nothing, and had been quite well until January 18, when she began, as she thought, in labor about 1 p. m., and sent for the midwife, who stayed with her all night. The following afternoon (January 19), getting no better, counsel was sent for.

We found the woman somewhat exhausted and suffering from pain of a periodic nature in the back and body. The abdomen presented all the appearances of normal pregnancy, and the fetal heart could be plainly heard. On examining per vaginam the finger at once came upon a hard round substance, very much like the fetal head at full time, well engaged in the cavity of the pelvis as in the second stage of labor; but this it clearly was not, for it was covered by the posterior vaginal wall, and on passing the finger along the front of the tumor the cervix could with difficulty be reached high up and above the symphysis, and tracing it backward the fetal head was just perceptible through the uterine wall. The os was not in the slightest dilated, and would not admit the finger tip. It was probable that labor had not commenced, and as it seemed impossible that delivery could be accomplished except by abdominal section, we gave her morphine to relieve the pain and recommended that she should be removed to the Cottage Hospital. She was taken there the same evening. Gradually the pain disappeared, and she had no further symptoms until January 30, when she had a rigor and her temperature went up to 102.6°, but fell the next day to normal. During the next two days she had two more rigors, and on one occasion the temperature was 105°. On the morning of February 2 she had another severe rigor, passing at that time 1½ pint of greenish fluid, but the os remained undilated, and she had no proper labor pains, though the whole abdomen was swollen, tender, and painful. The fetal heart could be distinctly heard.

Notes of the Operation.—On January 25, 1897, I received a letter from Dr. Husband, saying that he had a patient advanced in pregnancy whose pelvis was blocked up by a tumor.

On January 30 I received a second letter, to say: "At a consultation of the staff of the hospital this morning it was the wish of everyone that you should be asked to come and see the patient, and, if you think it advisable, perform the operation."

On February 2 I went to Ripon, and found the patient, a woman of 23, extremely ill, with a temperature of 103°. She had had a rigor on the 31st, and the temperature had reached 105°.

The pulse was very rapid, the abdomen enormously distended, the face pinched and anxious, and the condition generally extremely unsatisfactory. A pelvic examination revealed a soft tumor present in the pelvis, and as high as the finger could reach behind the pubes could be felt the os uteri. The fetal heart could be heard. Delivery per vias naturales was manifestly impossible, and the patient if left must certainly die as well as her child. In the presence, and with the consent of the whole staff of the hospital, all the members being present, abdominal section was at once performed, and the uterus incised by a vertical incision. Dr. Husband grasped the incised edges of the uterus to prevent bleeding, and I extracted the child and handed it over to Mr. Collier. I then passed my hand behind the uterus and drew it forward, and immediately the abdomen was flooded with most offensive pus, which had been confined in a cavity formed by intestines above, by the uterus in front, and by the ovarian cyst, itself full of pus, below.

As it was manifestly unsafe to perform Cæsa-rean section, I passed the wire of a serre-nœud around the uterus as low as I could safely apply it, after detaching adherent omentum and intestine. I then amputated the uterus and the ovarian tumor together, washed out the abdomen with hot boracic lotion, and sutured the wound in the ordinary way, leaving a long glass tube in the pelvis. I had regular reports on the after-progress from Dr. Husband, to whose skill in the after-treatment the patient's recovery is in a great measure due. The drainage tube was removed the next day. The wire of the serre-nœud came off early, soon after the week, and the stump was kept dry. The chart shows that the temperature fell to normal immediately, and remained so. Both mother and child are now well. When she called to see me two months later she and her child were pictures of health.

TREATMENT OF ANOSMIA.

DR. BIBARD has recently taken up the study of this subject. Among the causes of anosmia he refers to blows on the head, which are much more frequent than is generally supposed as a cause of loss of the sense of smell. They may

or may not be accompanied by fracture, for according to the author's observations a severe blow on the back of the head, as from a fall, is quite capable of causing laceration of the Schneiderian membrane or tearing of the olfactory nerves in their passage through the lamina cribosa of the ethmoid. In cases of essential anosmia without nasal lesion the author has found the following treatment produce good results: Nasal irrigation every morning with warm water; to snuff three times the following powder: sulphate of quinine, 10 cg.; subnitrate of bismuth, 10 g.; thirdly, electricity. In cases of hysterical anosmia the last is the most effective, and is employed in the form of faradization to the root of the nose, and this must be employed so as to produce actual pain.

THE TOLERANCE OF CREASOTE.

By C. W. GRAHAM, L. R. C. P., Carlisle.

IT may be of interest to record briefly the particulars of a case under my care in which creasote was exhibited with apparently unique tolerance. A gentleman, aged 35, with a distinct phthisical family history, was attacked twelve months ago with pulmonary tuberculosis. Positive evidence from bacteriological examination of the sputum was from time to time forthcoming during a period of six weeks, when he was acutely ill. In addition to the general principles of treatment, so soon as the diagnosis was established I prescribed beechwood creasote by the stomach, commencing with *m j* thrice daily, as well as inhalations of guaiacol. The patient, who was possessed of scientific attainments, fully realized the nature of his illness, and was most anxious from the first to saturate his system with the drug, being imbued with a strong faith in it. The dose was very rapidly increased, till at the end of a month, when I sent him to Arôsa, he was taking exactly 340 minims in every twenty-four hours. He never had any toxic symptoms. During the two and a half months the patient was at Arôsa he continued to take between 3 and 4 fluid drams each day. He returned completely restored to health in every detail. Shortly after his return home the patient's belief in creasote as a prophylactic inspired him to go on taking the drug, and

this he has done ever since without any ill effects, the dose varying from 100 to 140 minims a day. He continues in perfectly good health.

In searching records relating to the tolerance of creasote, I have failed to discover any parallel to this case. Advocates of creasote in the treatment of phthisis maintain that the value of it as a specific remedy must be in its exceptional tolerance. It should be noted that the patient inhaled large quantities of guaiacol all the time he was taking creasote by the stomach.

INTRAPERITONEAL LIGATURE OF THE UTERINE ARTERY.

DR. N. V. ALTOUKHOW of Moscow has devised a method of intraligamental ligature of the uterine artery for the purpose of performing hysterectomy without effusion of blood, and to determine atrophy of the uterus.

The method of operation is extremely simple:

Laparotomy having been performed, the round ligament is pulled forward, while the uterus and oviduct are maintained in their normal position, and an incision, three centimeters in length, is made into the anterior layer of the broad ligament, beginning at a distance of one centimeter from the ilio-pectineal line, immediately behind the round ligament and parallel to the latter. Passing through this incision into the connective tissue, without leaving the anterior layer of the broad ligament, one finds at a depth of from twelve to sixteen millimeters the uterine artery, which may be tied with the greatest ease, the ureter and uterine vein remaining attached to the posterior layer of the ligament.

The uterine arteries and pampiniform plexuses on both sides having thus been tied, the uterus and appendages may be extirpated without the least risk of a hemorrhage.

The Institute programme, as mailed to the membership, shows a number of excellent innovations in the promised feast. Notably the abridging of the number of papers for the sections, and the greater latitude given to discussions. Also, in one or more instances giving the whole section over to one topic, as in the section in clinical medicine and pathology.

COLICA INFANTUM.*

By PROFESSOR WIDERHOFER, Vienna.

ONE of the most frequent symptoms observed in dyspepsia and intestinal affections, and arising from many causes, is colic, so often seen in children. A nursing child suffering from colica flatulenta lies quiet, when suddenly it seems to be frightened, screams, becomes red in the face, the head is thrown back, the abdomen bloats, the hands become restless, the legs are drawn up and again extended, the toes stand apart. After discharging flatus, the child is quieted till another attack sets in. Often such an attack causes convulsions. During its crying spell and continual motion of the legs, it suddenly becomes quiet, and when looking at it, we see it attacked with clonic and tonic convulsions; the head drawn sideways; twitching with the upper and lower extremities. These reflex spasms, partly clonic, partly tetanic, in consequence of intestinal irritation, may last from a few minutes to an hour, or over; even, with short interruptions, a whole day. Attacks of colic arise from different causes. The child is incorrectly nourished, or it receives food which it cannot digest, or is overfed. Everything which produces dyspepsia may cause colic, with larger children by anomalies of the gastric and intestinal contents, especially with such as bolt their food.

A question of importance is whether in nursing children a colic may arise from mental irritation of the nurse; it is certain that when children take the breast during such a depressing emotional state of the nurse, attacks of colic and even convulsions may follow. It may also be caused by intestinal worms, by constipation, and the most severe attacks are those which show changes in the intestinal mucous membrane; children suffering from chronic intestinal catarrhs, from cholera infantum or dysentery may have colicky attacks with symptoms of collapse; an intestinal stenosis, in intussusception, in twisting of the intestines, the attacks may be of the greatest severity. We also meet cases of colic in affections of the central nervous system, in spinal affections, and infantile cases of intermittent fever manifest themselves by regular attacks of colic; appearing at one and the same time without any preceding prodromal symptoms. There is also a hysterical colic, especially in girls of five to twelve years. It may be well worth while to mention that children may suffer from lead colic, as they often play with

* This excellent article was translated from the *Arch. f. Klin. Med. Zool.* by the lamented Samuel Lilienthal, and printed in the *Clinical Homeopathist*. Its excellences have tempted us to reproduce it in full, even thus late.—
EDITOR.

things which are impregnated with lead, as rubber toys, or when they paint. When this colic sets in the symptoms are the same as in adults from the same cause ; abdomen sinks in, the bowels become contracted, and obstinate constipation results.

In relation to the diagnosis in a child suffering from flatulent colic ; how do we know that the reflex spasms arise from such a cause ? When an infant feels well at one time, at another time suffers several times during the day from colicky attacks ; when the passing of flatus gives momentary relief, when the abdomen remains more or less bloated, when dyspeptic symptoms are present, when no cerebral symptoms or any fever can be found—we are justified in diagnosing the case as a flatulent colic. I well remember a case where the colicky attacks, in intervals of five to ten minutes, lasted twenty-four hours ; in spite of bromide of potash, opium, hydrate of chloral, etc., and still it was only simple dyspepsia, caused by an otherwise excellent nurse, whose milk was too rich or fat, and, therefore, indigestible. In other cases of infantile colic, we have to differentiate whether the colic is more of a nervous nature, more of a neuralgic character, or a colic caused by ulcerating changes in the intestinal mucous membrane, and this decision is sometimes difficult. One should think that, when ulcers are present in the intestinal canal, the child would show us the painful spot, but this is not the case. Children of the age of seven to ten years suffering from belly-ache complain of pains around the navel. It may happen once in a while, when the ulcers have advanced so far as to produce an adhesive peritonitis, that they complain of a particular painful spot, but such cases are rare. Important points may be found in the motions of the child ; in colic from ulcerative processes, the child complains of belly-ache, draws up its legs, and keeps quiet ; in nervous colic, the child is restless, moves from one side to the other, and does not care to keep its intestines quiet ; in ulcerative colic, or in that from enteritis follicularis, the characteristic alvine discharges are detected. In colic from stenosis of the intestinal tube we meet bloody mucus in the stool, and the parents tell us that the child had no regular stool for some time, and it looks greatly collapsed, as in cholera.

The prognosis depends greatly on the cause, for cases have ended in death ; for when frequent attacks last several days, the child may die from exhaustion. The therapia also finds its indications in the cause : where coprostasis is present, removal of the impacted feces ; in helminthiasis, anthelminthica ; in colic from ulcerative processes, a careful treatment with

mucilaginous drinks, perhaps opiates. In colica flatulenta, our first indication is to lay the child down on a pillow and to give massage by rubbing the abdomen gently from the ascending to the descending colon ; after a few minutes of massage let us introduce a rubber tube into the anus and rotate it there ; after a few minutes, flatus will pass, to the great relief of the little patient, or we may give a warm bath and carry on the process in the bath. Only in very severe cases we may be forced to give a clysm of hydrate of chloral. After relieving the attack we must regulate the diet of the child. In nervous children, or hysterical girls, give liquor belladonnæ cyanicum (extr. belladonnæ, 0, 10 ; lique amygdalarum amararum, 5, 0-10,00 ; Ds. 10-20) ; drops every three or four hours. This also acts splendidly on the obstinate constipation, where purgantia, as a rule, fail to give any relief.

Even in our school there is no better remedy for the flatulent colic of children than belladonna, for we read among its symptoms : the child cries out suddenly, and after a while it stops crying as suddenly as it began, and appears as if nothing had happened ; convulsive starting with jerking of the muscles ; bending backward during the colicky pains, abdomen tympanitic and full of wind ; stools green, small, and frequent.

The very opposite we find under bryonia, which may therefore find its place in those ulcerative processes with peritonic adhesions ; the child has to be kept very quiet in order to relieve its colic and other sufferings ; the stools are dark, dry, and hard, as if burnt, or lumpy diarrhea, with undigested food or curdled milk, especially when hot weather seems to develop the colic.

In the violent emotions of nurses we may give the suitable remedy to the nurse and thus ward off its baneful effect on the nursling ; but when convulsions threaten, or have set in, our mind easily reverts to chamomilla, which from ancient times has been the panacea for infantile colic. The restlessness of the child evinces the nervous nature of the colic ; the child must be carried about, and frets worse from rest, which makes it cross and peevish ; the child feels dissatisfied after nursing, its breath may even be sour or foul (dyspeptic colic) ; moaning in sleep, with hot, sticky sweat on forehead, etc.

If the belladonna colic is relieved by hard pressure across abdomen, or rhus colic by lying on abdomen, we meet in colocynth (a great emotional nervous remedy) relief by bending double or by supporting the child on the shoulder of the nurse. Pitiful crying of the child, which writhes in every possible direction, undigested stools during or immediately after

nursing, frothy, frequent, preceded by severe colicky pains.

Acknowledging our belief in Schussler's tissue remedies we often prescribe with good success *magnesia phosphorica* for the wind colic of children, with or without diarrhea; where other remedies fail to relieve, and flatus neither pass up or down, we certainly would think of this drug.

A much neglected remedy is *oleander*, and still it has a peer in *lienteria*. The child always soils himself while passing flatus; there is rolling and rumbling in the bowels, with emission of much (sometimes fetid) flatus.

The same symptom of relief by carrying the child with the abdomen resting on the shoulder of the nurse and pressing freely against it, which we found under *colocynth*, is also met under *podophyllum* and *stannum*, but the former also gives us a very characteristic diarrhea, foul-smelling, profuse and gushing, often painless, each seeming to drain the patient dry, but soon the intestines feel full again, whereas *Teste* teaches us that *stannum* is a great remedy in *helminthiasis*; the morning aggravation of *podophyllum* is also a valuable hint.

I mention only a few remedies, in order to show the wealth of our *materia medica*, and the keynote system teaches us what an apparently trifling symptom may become the corner stone of the cure. Morphium injections to allay pains are the grand certificate to the physician that he does not know any better—a certificate to poverty which none of us are willing to acknowledge.

CHRONIC GASTRITIS.

By LOUIS A. KENGLA, M. D., San Francisco, Cal.

A REPORT of a very severe case of gastritis was freely copied in medical journals during the year 1896, in which *glycozone* was successfully used.

At that time J. W., aged thirty-eight, a blacksmith, came under my care. His illness began in 1894 with the usual symptoms of gastritis. In January, 1895, he had placed himself in the hands of one of our best physicians, under whose care he continued until November of the same year, when I was consulted.

Examination revealed an emaciated, thin, and badly nourished body; his eye, skin, and color, fair though pale; his temperature normal; the bowels inclined to constipation with occasional diarrhea with whites; pasty, offensive stools; the lungs, heart, and kidneys healthy; the liver a trifle small.

There was no painful point and no evidence of enlargement, tumor, or ulcer. He was so thin that the abdomen could be most thoroughly

examined. His tongue was heavily furred, red at the tip, indented at the edges, and the papillæ red and prominent.

He complained of being unable to take either solid or liquid food even in small quantities without causing heaviness, weight, oppression, pyrosis, eructation of gases, nausea, and finally headache and vomiting.

Since 1894 these symptoms had increased in severity, nausea never ceased, and this whole array of complaints would gradually accumulate in force and energy, overwhelming his system with an attack of headache and intermittent vomiting that would last from three to five days.

In 1895 these storms, growing worse, rendered his life almost unbearable. I had been attending him about a week when one of these attacks occurred. He had been vomiting one day before I saw him. The scene was truly pitiable. I found my poor emaciated patient in a small darkened room scarcely able to raise his head, gagging and straining constantly, bringing up finally, by the greatest of efforts, a teaspoonful of white glairy mucous; his head bound tightly or wrapped in ice cloths; his eyes congested; his cheeks hollow; his skin sallow and pale; his face bespeaking the intense agony he suffered, begging and pleading to those around him for relief from the horrible nausea and retching.

I remained with him an hour and during that time he was not free for five minutes from efforts at vomiting. His sleepless, aching brain seemed racked to distraction. He would gag, vomit, and fall back exhausted.

This continued three days, gradually lessening. Sleep came only through exhaustion. Every particle of food (liquid or solid) was promptly vomited. During these attacks the temperature was increased from 99 to 103.

These attacks were always of a similar character and from November 1, 1895, to July 3, 1896, they occurred every ten days or two weeks.

The physician who had treated him had used drugs, diets, and lavage faithfully and persistently, so that, at the outset, I was completely handicapped.

About July 3, 1896, I read the article referred to above, and in desperation and despair of ever relieving him, I ordered *glycozone* one-half, then one dram, well diluted, twenty minutes before meal time.

In a few days he said he felt better; within a week he repeated the assertion. To the utter astonishment of myself and his friends, six weeks passed without a recurrence of his severe symptoms.

About August 20 he was so much improved that, to hurry matters, I concluded to try

The American Homeopathist.

NEW YORK, JULY 15, 1898.

FRANK KRAFT, M.D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



W. W. GLEASON, M.D.
Attleboro, Mass.

OMAHA, Neb., June 24, 1898.

TO WHOM IT MAY CONCERN:

In THE AMERICAN HOMEOPATHIST of date Nov. 1, 1897, I published a statement concerning Dr. Chas. Gatchell, Second Vice-President of the American Institute of Homeopathy, in the following language:

"At the conclusion of the sessions of the Pedological Section at Buffalo, the "Era"

secretly approached the Institute stenographer, one of our paid assistants, who had taken the discussions, and offered HIM money for a copy of those discussions!"

This charge is untrue. At the time I was misinformed. The editorial was incorrect, and I take this same public means without solicitation to retract the statement. I regret having done Dr. Gatchell this injustice.

FRANK KRAFT, M.D.

Never before have we seen the keys of a city actually handed to a visiting organization as was done by the Mayor at Omaha. By the bye, what became of the keys afterward?

The Mayor of Omaha was a jolly boy. His speech was a good one and to the point. He told how he had formerly committed all his welcoming speeches to heart. But on one day he started to deliver a speech of welcome intended for the W. C. T. U. to the Retail Liquor Dealers' Association. Since then he read his speeches.

Mrs. Dr. Joseph T. Cook, of Buffalo, made a very effective and well-received speech on the floor of the Institute in relation to the work planned and done by the Ladies' Hahnemann Monument Fund Association. She said that she was surprised to find how little the laity knew about Hahnemann. She had received subscriptions even from allopaths, physicians and laymen. Needless to say, she was applauded to the echo.

The Eclectic Medical Association, which met in Omaha about the same time as ourselves, sent us a very warm and cordial greeting, which the Institute acknowledged in due and ancient form, peace and harmony prevailing.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Jatropha curcas in Cholera Infantum.

Dr. T. Dwight Stowe reports that on August 25th he was called to see an infant three weeks old. "The child was always delicate, and the mother had an insufficient quantity of milk. When I was called he had been sick ten days. Had at first a bilious diarrhea, with nausea and vomiting of the milk and water taken. The vomit seemed half albuminous. On the day I was called the child's symptoms had become alarming. He was extremely emaciated, skin shriveled, cold and icterous. Now and then he vomited water and milk, but had frequent, profuse, thin, watery, gushing stools, "pouring away in a torrent," and wetting the diapers through. Each stool was preceded by loud rumbling, as of water pouring from a bottle. He likewise had great thirst for water, stools coming on soon after drinking. Gave *Jatropha curcas* 30th in aqueous solution. The first dose was partly retained, partly vomited, but he vomited no more. The child had but three diarrhea stools afterward and improved rapidly; from a mere skeleton he, in some five days, recovered his embonpoint. Gave but two prescription of *Jatropha* and but two of *China*²⁰⁰ following the *Jatropha*.

Malandrinum 30 for Fistula in a Pony.

Dr. Alfred Heath introduces an original remedy of his preparation with this report: "Some years ago a young titled lady patient came to ask me if I could cure a valuable pony of hers. The pony had had 'strangles,' and as a sequela a complete fistula had formed in its jaw. It was a very valuable prize pony. The local vet. could do nothing, so Sir I—, a distinguished vet., was called down from London to see the pony. He pronounced it a complete fistula and said he must operate, but was afraid it was very risky, and that he might kill the pony. The opinion caused the lady to consult me. I gave *Malandrinum*³⁰, which I had recently made myself from a very advanced case of 'grease,' in ten days the fistula had healed, and remains well to this moment, and the pony has, since the cure, won several prizes at shows. With this remedy in high potencies, either 30th or 200th, I have

cured several cases of fistula in human beings. Generally, the fistula heals up in a week or ten days."

[Dr. Heath is guided to this remedy by his idea of the relationship between fistula, phthisis and vaccination.]

Abies nigra in Intermittent.

This unusual remedy is advanced by Dr. E. A. Taylor to show the fallacy of depending on "the usual remedies."

Case 1.—Albert B., aged twenty-eight years, janitor. Has had intermittent fever about a year. Allopathic treatment; also treated by some of our school who gave "the usual remedies" with the usual result—failure. Chill begins in the knees, about 8 or 9 a. m., accompanied by a sensation of a lump in the stomach. Chill lasts three or four hours, followed by heat, dull frontal headache, with dim vision and profuse perspiration. Chill every other day at the same hour; thirst with the chill and fever; bad taste in mouth; brown coating on the tongue; after eating feels lump in stomach, "very hard and about the size of an egg." This was my first case of intermittent fever. Should I give quinine and the "usual remedies?" I decided to try the law, treat the patient and let the ague take care of itself. He got *Abies nigra* and had no more chills.

Lilium tig. m. in Dysmenorrhea.

Dr. Malcolm Dills⁴ treated last fall a lady aged thirty-seven years, weight two hundred and twenty-five pounds, married six years, four years ago gave birth to a child, still-born, shortly after this began to feel bad, as she expressed it, menstrual period every three weeks, flow scanty, pain in back, headaches, constipation, pain in region of uterus, a heavy bearing down, profuse leucorrhea very offensive. She gave these as the symptoms when she first consulted a physician six and one-half years ago. She was treated locally by him for two years, using during this period all manner of applications, douches, suppositories ad nauseam, consulted specialist, he curetted, packed and treated case for two months with no marked relief. Advised removal of uterus; to this the patient objected; she returned home and continued local treatment until she finally gave up in despair. Some friend prevailed on her to try little sugar pills. She finally came to me, and I recorded her case in detail. I give the principal symptoms that guided me in my prescription. Menstrual period every three weeks, scanty, colored clothes green,

lasts seven or eight days, severe headaches, a crazy feeling, attacks before menses so severe she loses her mind, gets crazy, believes she is going crazy, when she gets up she feels as if everything was pressing out, afraid to walk without supporting abdomen, tired and worn-out feeling, the bearing down so severe, kept a recumbent position two-thirds of her time.

Gave one dose *Lil-tig*, m., to be repeated every twenty-four hours for three days. Fourth day patient walked into office with an expression that gave me more satisfaction than words could convey. Her report that bearing-down pains had all left her, headache relieved, but she felt weak and was very apprehensive that her troubles would return; mind seemed anxious about this, as from some impending trouble: *Ignatia* 3x, one dose night and morning until relieved, to report in one week; patient returned in four days, relieved of all pains and aches, and you may be sure she meant it. Handed me a check for \$50 with the remark that "she was my patient from this time on."

Now, gentlemen, there is the case, make of it what you may. I never examined her uterus and do not know that she has one. The patient is well and free from any trouble at this writing.

Salvia off. in Nocturnal Sweats.

Dr. Amado Gort³² records that Dr. Comemale (a homeopathist) employs this drug to combat the night-sweats of consumptives. He prepares the tincture by macerating one hundred parts of the flowers and an equal part of the leaves in 500 gms. of alcohol. He administers ten to thirty drops of this tincture a few hours before the expected time of the appearance of the sweat. Under its influence the perspiration ceases and its action may persist for more than eight days.

Professor Trousseau, of Paris, recommends this drug in immoderate and debilitating sweats—"sueurs immodérées et débilitantes." He also made a proving with an infusion of the leaves, which he records in his excellent work, "Thérapeutique et Matière Médicale," vol. iii., p. 434, and on the next page proceeds to praise it for its antisudoral virtues, after having said that it is decidedly sudorific. "Ce fait n'a pourtant rien de contradictoire." . . . Van Swieten prescribed this drug in a wine, with success, with night sweats, which so weaken those convalescing from fevers. I remember that I was often forced to drink bitter infusions—"teas"—of sage to break up "colds," and es-

pecially for debilitating sweats following a broncho-pneumonia, when a child. I have found opium in the tincture to be a very useful remedy in profuse sweating after typhoid fever. In a nun who was convalescing from an attack of grippe, and who was obliged to change her underclothes from five to seven times a day and night, morphine, one-fourth grain to four ounces of water, promptly caused the immoderate sweating to cease.

Ammonium carb. in Uremia.

Mifflin, of Baltimore^{5 22}, being struck by the view of Prof. Frericks, that uremia is excited by the ammonia carbonica produced by the decomposition of urea in the blood, proposes the use of that drug where symptomatically indicated. In its pathogenesis he finds: Forgetful, absent-minded, confusion and dullness in the head; gloomy and depressed, with frequent giddiness; headache, tearing pain in the head, with nausea and vomiting; vision obscured, with bloodshot eyes, and often diplopia; pale, bloated face, with eruptions and indurations; no appetite, and continued thirst, nausea, vomiting and heartburn; cutting pain in the bladder with great pressure and frequent urination, urine containing sandy and whitish sediment; shortness of breath on exertion; frequent palpitation, with hard, tense pulse; excessive somnolence. This is a striking picture of uremia. The writer has tried the remedy in four cases which presented these symptoms, in all with benefit. No permanent effect upon the kidney lesion was secured, however.

Quinine Blindness.

A. W. Calhoun³⁸ reports the case of a patient, a ten-year-old girl from the river bottoms of Arkansas, living in a flat section of the country, upon the banks of a river, where, in consequence of the prevalence of malarial fever, the inhabitants were accustomed to use quinine freely. The patient had a chill which was diagnosed by the father as congestive, and large doses of quinine were frequently given, until, at the end of the third day, the child had taken 720 grains.

The patient becoming unconscious, the father called in the family physician, who restored her to consciousness, after several days of vigorous treatment, but she was totally blind.

In consequence of her poor health the eye was not examined until six weeks had elapsed, at which time there was a typical white atro-

both optic nerves, the blood vessels of the fundus were diminished to mere threads, and there was not the faintest perception of light. The pupils were widely dilated and responded to light very imperceptibly. The hearing greatly affected, but much improved. Strychnine, electricity and general tonics were used for three or four weeks, but total blindness remained permanent.

Apis mel. in Ovarian Dropsy.

Dr. George Lee verifies Hering's symptoms credited to *Apis*: "Feeling of weight; heaviness in the ovarian region." "Right ovary enlarged." "Dropsy of the ovaries (right)." The value of *Apis* in this lesion had been doubted by Hughes.

"In the fall of 1876, a German woman, married, thirty-six years of age, called upon me for a prescription for diarrhea. I prescribed *Ars.*, in accordance with the apparent symptoms. In about a week she returned to report a temporary check to the discharge, followed by worse diarrhea than before. I prescribed *Ars.*. She remained away two weeks, at the expiration of which time she came to me in much distress and alarm. Her diarrhea was as bad as ever, and she stated further that she passed very little water, and that there was a lump in the left ovarian region. She was much emaciated and her countenance was anxious. She was so weak that she could stand upon her feet with difficulty, and complained of a constant feeling of weight and heaviness in the ovarian region, left side, however.

I found the ovary as large as a regulation baseball and a good deal heavier. By placing one hand upon the abdominal surface, and introducing two fingers of the other into the vagina, I could get quite an accurate idea of its size and weight.

I prescribed twenty-four powders of the 3d trit. of *Apis*, directing her to take two powders a day. I also recommended a daily bath in strong brine and checked the diarrhea.

The treatment promptly secured a copious flow of urine; the tumor rapidly diminished until it entirely disappeared. The woman regained strength and color, and as yet has had no return of the trouble.

In differentiating between seborrhea and pityriasis of the scalp, Dr. Cantrell states that the former condition presents sebaceous excretion and crusts, while the latter shows no moisture, but a great accumulation of epidermic scales.

JOTTINGS BY THE EDITOR AT OMAHA.



SUNDAY, June 25, 1898.

In the first place it has been hotter than a biscuit ever since we arrived at Omaha. Now I do not mean this in any doubtful sense. It has been hot. Both as to weather and Institute. The former may in God's time get cooler; but I question whether there can be any cooling process in the matter of Institute politics. Are there any politics in the Institute? Well, just a sort of heated rivalry for some of the offices.

The Institute opened with a warm welcome—very warm. It met first in the Creighton college building, with its Materia Medica Conference on the afternoon of Thursday. In the absence of Chairman Allen, Dr. Dewey, the secretary, called the meeting to order and Dr. Pemberton Dudley gave a recapitulation of what the Conference had tried to do, what it had done, and what it still had to do. He spoke from a copy of the original questions, pointing out the defects in the symptomatology and urging improvements. The three hours assigned to this only session of the Conference was completely filled out with discussions. These latter were participated in by Drs. Price, Allen, Pierson, Hanchett, Holmes, Fisher, Royal and many others. At the conclusion of the session a motion prevailed that this Conference now report finally to the Institute; that hereafter it become a part of the regular Materia Medica Section.

Still the heat did not abate. In the evening, undismayed by the circumambient heat, we hied us up a steep hill to the Congregational Church to witness the formal opening of the Fifty-fourth Annual Session of the American Institute of Homeopathy. Amid some music, some flowers and some heat, the Governor of the State, the Mayor of the City, and Dr. Wood, of the Local Committee, the formal ceremony was properly and well done, albeit a little lengthily. Our worthy president, Dr. Wright, was a trifle overshadowed by the greatnesses sitting on the same bench with him, but when his time came, he was fully equal to the occasion, and acquitted himself well. As we predicted, on all occasions he has been a good presiding officer, has been letter-perfect, and unusually fair-minded in his decisions and presidings. He was guilty of one fault, however, which ought to embalm his name with the really great men of the Institute; namely, he had no elaborate presi-

dential address. He apologized for this by saying that he had not been very well for some time past, as if the omission was but a virtue of the supremest type of magnitude. Would that future generations but follow his example!

If I had not been editor of THE AMERICAN HOMEOPATHIST, I would not have trod on so many people's toes with my pen. I have spent several hours explaining how I intended to write this or that article to which they call my attention now that they have got me up a stump. Indeed, I begin to think that every man I see is waiting for me in illy concealed restive mood to ask why in sam hill I want to pick on him all the time? Why don't I hit the other fellow sometime for a change? It does seem hard to have to write something for your journal so that the 15,000 readers won't cancel their subscription, and yet if I write something that is timely and strikes me as spicy and well written I am sure to have sent me a "stuffed" club asking for an explanation. I think it was "Sunset" Cox who said that a young author brought a story to an elder writer and critic for an opinion. After reading the effusion, the critic said: "Why, yes, this is a fairly well-written story, but doesn't seem to have any point." "That's it, exactly," eagerly put in the young author, "that's it exactly: I don't want to make any point, for just as sure as I do the critics will catch me up on it."

There are a great many vacancies in the customary attendance upon the Institute. Talbot has not arrived, if he is to come at all. T. F. Allen sends neither himself nor his paper. New York has the veterans of the legion—Porter, Norton, King, the two Smiths and a few whose names I do not at this moment recall. Van Baun is here with what some of his enemies call gout. Dudley is taking a large part in the proceedings. And why shouldn't he? A man who has safely passed through several years of general secretaryship of the Institute and then one more year of presidency for good measure, is capable of filling any position anywhere. Baltimore is here with Price. Washington is represented by Custis and King. Ohio has a fair quota with Walton at the head. Then there are Geohegan, Carter, Fahnestock, Baxter, Wood, Sawyer, Carpenter, Van Norman. Kansas City sends us Delap, Neumeister, Foster (with a smooth face), and Elliott. Denver has Smythe, Anderson, Kehr, and others from Colorado making

all told fourteen. But Chicago is here. Lullam is here. Allen, Stafford, Gatchell, Wilson A. Smith, Pierson, Crutcher, Fisher, Cobb, Pratt, and numerous other folks. Pittsburg sends us Monument McClelland. Kentucky gives us Sister Millsop and Brer. Dills. We miss Clokey, who was so striking a figure at the Iroquois last year. Dr. Biggar came late yesterday. I forgot to mention that J. Kent Sanders also partook of the Institute's and my hospitality. I loaned him my lead pencil yesterday and have not seen either him or that pencil since. I do not know the Nebraskans or the Iowans. They all seem to know me. But there is nothing either wonderful or complimentary in that one-sided knowledge. I have been pointed out as one would a malefactor who on the forthcoming to-morrow is to furnish a Roman half holiday. I have been trying to think what I may have written about the Omahaites in especial or the Nebraskans in general. But memory doesn't serve me. I must take a high potency of lycopodium when I get near my medicine case again. I believe lycopodium is "good for" weak memory in those of large brain and small feet. Martin Besemer is here from Ithaca. He is still the same good "Bessie, dear," that he was when Dewey—by the bye, he is here, too—took the seven of us from London to Paris and back again, a little damaged but still in the ring.

As to the Trans-Mississippi Exposition. I haven't been out there yet. A number have gone. I was speaking with my partner yesterday for her impressions. She seemed to think it was a beautiful place, or would be, when it was finished. It is still very much in the hands of the workmen, and I am told that in order to outdo Chicago they have two mid-way plaisances out there. I can't help it, I have got to say something in my old way even if I have to apologize for it in the next issue. Omaha, unlike Ann Arbor and Cleveland, has not a united homeopathic profession. There is some considerable friction here. And we Instituters note it at almost every turn.

Dr. Hanchett, however, deserves special commendation for his untiring efforts. He it was who was the mainspring in the inviting of the Institute to Omaha. He is a hard worker in all that pertains to the public success of our school. His patrons are among the wealthiest. He is, unfortunately, like Fisher and me, aggressive, and I make no doubt if he was an editor he would feel tempted to say sharp

things occasionally. Now having written the above, I will return to the other style of composition. If I have offended anybody, he will please apply at the box office for one of our blank apologies, fill it out to suit himself and forward to us for signature.

When I go down the street—though to be literally true, I should say, when I go up a street, for everything here that you want right bad is at the top or near the top of a hill—I hear strains of earthy music, and I note the coppers in front of their respective shows inciting the stranger, the unwary and the visiting doctor to step inside and see the wonders, anatomical and otherwise. The streets are so wide—many of them—that I make short cuts by cat-e-cornering. I am informed that this vicious conduct on my part, together with my habit of stopping at all large show windows and admiring the beautiful displays, undoubtedly marks me as coming up from the country. And that if I am not careful I will be hailed as some Reuben and have a gold brick sold to me.

From the very far West I believe we have only one member, but he well represents the Pacific Coast. I refer to Dr. Currier. You ought to meet him. You wouldn't forget his geniality and cordiality, his hairlessness and good stories if you was to live to a hundred. He's just beaming over with fun and virtues. (I put that last word designedly in the plural. However, if that is not enough let him apply for a blank apology). But what I am particularly getting to is that Currier comes to us from California with an invitation to bring the Institute to San Francisco in 1901! Think of it, brethren! Doesn't that take away your breath? But wouldn't it be an outing never to be forgotten! Who ever heard of California doing hospitality by halves? By all means let us arrange matters to go there in 1901.

One of the chief disappointments of the Omaha session is the absence of Richard Hughes. In the early part of the year he expressed the wish that he might be with us at Omaha. He would have been a most welcome guest, and I am sure those who met him in London in 1896, if none other, would have made his stay here royally hospitable. However much we may differ with him on his—if it is not his, whose is it?—his *Cyclopedia of Drug Pathogenesis*, we have never failed to regard him as other than a gentleman who fitly represents his type of homeopathy in

England. It would have been a wonderful occasion could he have come to Omaha, and to have heard, from his own lips, an account of his recent presence and ministrations at the grave and opened coffin of Hahnemann while transferring the remains from its obscure resting place in Montmartre to Père Lachaise.

Just a few moments ago Dr. MacLachlan took me behind the smokehouse and expostulated with me for running down the Ann Arbor school. Singular how differently people read the same article, for another inquirer recently asked why I was continually running up the Ann Arbor and running down the Cleveland school. And there you are. But that reminds me that a member of the Institute, when I was being introduced to him, so far forgot himself as to say that he admired my style of writing, and that my journal was always welcome on his desk. But as all editors know, these admiring and admirable fellows are very few and far between.

Atlantic City was chosen as the next place of meeting.

Dr. Bailey, upon his election, made an appropriate speech. He said he accepted the office more as a tribute to the West than to himself personally. Our "Blue-Grass" sister, Millsop, had to come forward and tell how glad she was that there were two very healthy men between her and the possible presiding. She would resist all temptation to make 'way with them. Norton wasn't there to answer to his call. Porter couldn't be made to talk. Kellogg wasn't there, so when my own turn came it was a very short speech. I will permit myself to say that I believe the feeling of the Institute membership as they leave Omaha will be better than it has been for a long time, and that in the coming twelve months there will be more uniform pulling for the Institute than there has been for years. The coming West has been a good thing and will tend to cement the sections. There can be no complaint about the dominance of the "old" man, seniors and young men are equally in evidence. I must not forget to say that Fisher is now one of the Seniors. I saw him the morning after, and I could find no outward sign of violence done him. Indeed, he looked as if it had agreed with him. Also I want to say that Dr. Biggar delivered the address in eulogy of the Seniors at the memorial services, and did it well. The morning Bee published a large extract and it reads well. Dr. Runnels,

the chairman, was called home before he could present his address. The services, with music and prayer, and a short but appropriate address from President Wright, were beautiful and fitly commemorated the loss of those who have fallen in life's battle since the last Institute. The Local Committee is apprehensive all the time that the Institute will not be satisfied with its reception and entertainment. I want assure Dr. Hanchett, who has been the one most visible in all the arrangements, that, so far as I have been able to learn, there has not been a complaint. The entertainment provided is ample, is whole-hearted, and everybody seems satisfied. Dr. Hanchett has nothing to upbraid himself with. The Institute recognizes his worth, and I join with a good many in wishing that it may reward him at no distant date for his faithfulness to our interests. This morning the ladies had a carriage ride over the city, and my wife, who was of the party, says she was really surprised to see how large a city there is, and how very home-like and comfortable it seems.

The Creighton Medical College is one of the most complete buildings I have ever seen for teaching purposes. It must be a pleasure to teach in such a structure. It was well adapted, too, for our Institute purposes. The exhibitors are here in good numbers, and seem pleased with the attention they are receiving from the membership. Mellins' Food has a very artistic display. Leopold Hoff's Malt was continually surrounded by patrons. Maltine has an attractive display.

TUESDAY, June 28, 1898.

To-day is Institute Day. Of course I may be prejudiced, but it seems to me that we are just now getting down to business. On yesterday the Board of Censors, through Dr. Peck, reported the passing by them and ready for election of a long list of names, some few of whom had been objected to. The Censors had heard the objections and concluded that they were of especial value and so they recommended the election of the new members.

A resolution was proposed by Van Baum looking to an abridging of the time occupied by the session of the Institute as a whole. Walton has a good suggestion in this matter, namely, to divide the bureaus, and let them meet but every alternate year. For instance, gynecology and surgery being in much allied, let one of these meet one year, and the other the next year. And so proceed with others of

the sections. He correctly says that even the exhibitors, who are naturally shrewd business men and observers, say that the meetings are too long and too much attenuated. They draw invidious comparisons between ourselves and the American Medical Association. I will say, too, that it would be a saving in the matter of stenographers as well. And the same is true of the printing bill. Dr. Gatchell has been appointed chairman of Clinical Medicine; Dr. Van Lennep, chairman of Surgery; Dr. Hazard, chairman of Materia Medica.

At the Neurology section the paper by Professor Bailey, of the Kansas University, was exceedingly interesting in showing that dilutions carried electricity better than the crude liquid; in other words, that the potency question was a scientific and demonstrable fact. I advise all homeopaths to read this paper when it appears in print.

The annual election of officers resulted as follows: President, Benjamin F. Bailey, of Lincoln, Neb.; First Vice-President, A. B. Norton; Second Vice-President, Sarah J. Millsop; General Secretary, E. H. Porter; Recording Secretary, Frank Kraft; Assistant Secretary, T. E. Smith; Treasurer, E. M. Kellogg; Censors, E. C. Price; Registrar, H. C. Aldrich.

The following are the committees appointed by President Wright:

Medical Education—H. F. Biggar, Cleveland, O., Chairman; E. C. Price, E. H. Linnell, St. Clair Smith, J. A. Rockwell.

Life Insurance Examiners—Geo. B. Peck, Providence, R. I., Chairman.

Organization—T. Franklin Smith, New York, Chairman; Sarah J. Allen, H. C. Aldrich, W. T. Talbot, J. W. Anderson.

Literature—W. C. Goodno, Philadelphia, Chairman; S. C. Delap, H. R. Arndt, A. Wanstall, J. P. Rand.

Publication—T. Y. Kinne, Paterson, N. J., Chairman; H. M. Dearborn, Francis E. Doughty.

International Bureau of Homeopathy—J. B. G. Custis, Washington, D. C., Chairman; S. H. Knight, C. S. Stettler, B. W. James, G. T. Laidlaw.

Memorial Services—S. P. Hedges, H. C. French, C. S. Albertson, G. H. Fulford, Sophia Penfield.

Transportation—J. B. Garrison, New York, Chairman; D. A. Strickler, O. S. Wood, E. R. Fiske, P. E. Triem.

Resolutions—J. S. Mitchell, Chicago, Chairman; W. D. Foster, Mary Benson, A. P. Williamson, J. T. Greenleaf.

Pres.—Wm. R. King, Washington, Chairman; J. T. Cook, Lizzie G. Gutherz, D. A. Foote, W. W. Stafford.

Interstate—W. H. Hanchett, Omaha, Chairman.

Committee to Arrange Program for Future Meetings—W. W. Van Baun, Philadelphia, Chairman; D. A. MacLachlan, C. E. Walton, T. Franklin Smith, J. S. Mitchell, Geo. B. Peck.

Committee of Americans to Assist in Determining Whether Curantur or Curentur is Proper—J. H. McClelland, Pittsburg, Chairman; Pemberton Dudley, I. T. Talbot.

CHICAGO, July 1, 1898.

Came here this morning. Find it nearly as hot as at Omaha. I spent the whole day yesterday looking over Omaha and I am ready to declare that it is a beautiful residence city, with all the possibilities of a large metropolis. This is not saying that it is not a large city even now; to be sure it has no twenty-four or eleven-story buildings, but it has a number of fine structures that would do credit even to some of our larger eastern cities. It has a county courthouse and a city-hall that are elegant in design and structure. This is true as well of the Bee building, the New York Life, the new post-office, the custom house and others not now recalled. The streets, after you cross the brow of the first hill going west, are mostly asphalt, and are lined with residences of the most modern types. The air yesterday was laden with the white sweet clover and the odor of many sweet flowers. The country seen from any of the many hills is apparently thrifty, under active cultivation, with no unsightly open spots. It has seemed to me very odd that with so many asphalted streets, and so many coasting places, that one sees so few bicycles. And of the few I have seen none seemed to be new. The depot, which I maligned in my former letter, I found yesterday on closer examination is in course of completion and will very soon be occupied; what are sheds now will then be yards; the front of the building—of sand stone—reminds me very much of the Thames front of the London Custom House.

The Fifty-fourth Annual Session of the American Institute is a thing of the past. It closed its work on Wednesday, the 29th, about noon.

The usual few remained to see the session die. And some few of these remained a day longer, and went farther west. Porter and his wife went to the Yellowstone; Le Seure and his party went to Salt Lake City; the Critique party didn't go at all. Failed to get the needed 100 in order to be entitled to special rates. Delamater went west on a ranch. Aldrich went home. And so one by one the Institute membership dispersed until it was no longer possible to find a homeopathic doctor at the Millard or elsewhere of the visitors. It may seem a bit of sentimentality, but to me, who has now sat at the death of so many sessions of this Institute, it is always with a feeling of sorrow that I watch the membership break up and disperse. For who knows that we shall ever see them all again in this life. Think how many fell by the way during the past twelve-month. It happened that only a few of these were well known to the general body of the Institute; but each such deceased member was faithful and when we last touched his living hand we did not know that we should see him no more. We part so lightly at these meetings! We jolly each other and exchange such trivialities as if nothing were more certain than our return to the next session next year. Yet who can say that he will return to Atlantic City? To me it is homesickly—to put it no stronger—to go to the Millard and find it bare of its Institute decorations, and no one in the lobby to whom I may address myself, and deadlier than all other dead things is Creighton College, where we held our meetings. The exhibitors began to pack up directly after the election. They knew, or believed they knew, the Institute inculcates peace. That in this broken, and they might as well take in their signs. But above all it is good to know that the Institute inculcates peace. That in this session, especially, notwithstanding the fierceness of some of the electioneering, all closed peacefully, and the parties have returned home in harmony and good-fellowship. So far as I can make it out, the 54th has been a peaceful meeting, and has closed without leaving a sting in the heart of any member. May we all gather again next year about the altar of the Institute at Atlantic City. The closing hours were very prosaic. There was nothing left to be done for that last hour except the report of the Committee on Resolutions, which brought in a generous handful of flowery resolutions thanking the mayor, the governor, the press, the local committee, the reception people, the college folks and others. I have often won-

dered whether the writing of flowery resolutions is not sometimes sadly overdone. That the thanks of the Institute are due for favors received goes without argument; but too many thanks spoil the soup. Delamater informed me that the resolutions which he turned in at the last were the handiwork of several people.

A concluding reflection, and I have done on Institute matters. Those who have not followed the Institute, session after session, as I have done for twelve years, are not able to judge what a change comes over the make-up of these meetings. Take for instance this Omaha meeting, and take out of it say thirty to fifty well known persons, and the rest will be strangers. Go east and the same will be practically true. The locality in which we meet governs the Institute totality. We have now had two sessions without Talbot and Allen and Helmuth; yet they are not forgotten. Talk about relieving the elders and putting in younger members—what would become of the body eventually? It must have stability in its executive force. It would be a bad mistake, for instance, to change the general secretary every year, or the assistant treasurer, with his other office of collector of the Institute statistics. This may also be said of the recording secretaryship, for he in reality carries the Institute in his note-book and satchel when he leaves for home. These three officers in especial ought not to be changed except for good cause. And even the new men and women who have come up out of the west and south realize this, for they have kept these men in place for years.

It is to be hoped that no cold wave will strike Atlantic City about the time set for our next annual session. If we could have been at Atlantic City during the prostrating heat of Omaha, and yet have had the same hospitality and entertainment, the session would have been ideal. But it was good, just the same, and one long to be remembered.

THE EDITOR.

A CASE OF LIE.

We have recently learned that a certain St. Louis medical scientist claims to have so improved upon the potassium platino-cyanide screens in their use with the X-ray that he has been enabled to absolutely foretell the sex of the fetus in utero some time prior to the period of quickening, and on two different occasions at the same period truthfully told

the presence of twins. As a mere matter of remark, we only suggest that this scientist probably uses some very vigorous form of lye on his potassium platino-cyanide screens to obtain these results.—Railway Surgeon.



Pil. No. 50.

The Pacific Medical Journal.

Dr. H. A. Hare finds that camphoric acid controls the sweating of tuberculous patients in the great majority of cases, and does not produce any disagreeable symptoms, such as are usually caused by atropine or other powerful antisudorifics. Twenty grains are ordinarily quite sufficient to control the sweat, provided the dose is given early enough to be absorbed before the time at which the sweating appears. Other observers have shown that as much as sixty grains may be given without any deleterious effect. The drug may be given in cachet, dissolved in whisky or brandy, placed in dry powder upon the tongue and washed down with a little water or milk; but as it is slowly absorbed, it should be given an hour or two before the anticipated time of the sweating.

American Medical Monthly.

There is everywhere evidence of dissatisfaction with the present status of our *Materia Medica*. The enormous bulk of the homeopathic provings renders their study difficult and almost impossible. Hence the trend of thought among our best thinkers is in the line of some sort of condensation which shall make them manageable. How this can be done is still a great problem.

There exists also a deep-seated impression that many of the symptoms included in these lists are defective or spurious and so we have a great variety of attempts at expurgation, all of which are more or less unsatisfactory. . . .

It is noticeable how little has been added to our real knowledge of drugs since Hahnemann's death. There are but few at the present time with sufficient enthusiasm to continue drug provings. The chief business of the great conferences on *materia medica* in connection with our national society is concerned with discussions as to the rearrangement or expurgation of existing provings. Very little original work is being attempted, and the school seems to be powerless to get out of its ruts or make further advance. . . .

The remedy is not far to seek. The time has

when the homeopathic school must endow and equip an institution for carrying on pharmacological research. Not only must the money necessary for such an equipment be raised, but a salary list must be provided sufficiently large to enable men to give up the necessities of general medical practice and to be removed from the anxieties of the bread-and-butter questions.—E. M. Howard, M.D., at Hahnemann Jubilee Meeting.

The Pacific Coast Journal of Homeopathy.

If the recent session of the California State Homeopathic Medical Society was not a brilliant success from a professional or social standpoint, it was a thoroughly respectable affair in every respect. The attendance, for a country of immense distances, was good; the presiding officer, Dr. George H. Martin, displayed energy and skill, and did all in his power to prevent waste of time; the papers presented were of a practical character, and a few possessed unusual merit, and, most important of all, the room in which the sessions were held not only possessed good acoustic properties, but was so situated that the attention of speakers and listeners was not constantly distracted by the intrusion of strangers or by the noise on the street or in the halls of the hotel. If there was any occasion for regret it arose from the conspicuous lack of interest on the part of the profession in San Francisco and neighboring cities and from the one-sidedness of the discussions on papers presented.

[Ah, yes, dear Bro. Editor, there are others, who will not attend local, state or institute sessions, or read a perfunctory lecture in the college, so long as there is the least opportunity to pick up another dollar.]

The Medical Counselor.

In 1895 Dr. B. F. Bailey was elected treasurer of the Nebraska State Board of Health and is now president of that board. We hope it won't offend Bro. Kraft, but we should like to vouch for the moral character of the doctor by saying that he was a trustee of the Congregational church of his town, a president of Y. M. C. A., and has been known to be interested in the Y. P. S. C. E.

[No; it doesn't offend Bro. Kraft in the least. It may surprise a good many readers to know that Bro. Kraft is a member of the Methodist church, who served his time as assistant superintendent and teacher of the Sunday school; was one of the vice presidents of the Epworth League; is physician to the

Methodist Deaconess Home, etc., etc., etc. Our writing on the Clerical Domination in Medicine, as we have repeatedly and emphatically said, had naught to do with the beauties of religion—when applied where it belonged. But we as firmly repeat that religion as a business has no business in a medical college; that the preacher has no special business to deliver a medical faculty address, and that a church building is not the place most fit for graduating a class made up of all shades of religious opinion.]

The Homeopathic Recorder.

"Free List Positively Suspended."—Now last, but not least, come the scores of "trained nurses" who themselves are becoming a drug on the market. This class forms the greatest imposition of all. For why? These women make from ten to twenty dollars per week. Their expenses are very light. Two, three and even four rent a room together at a cost of from one to two dollars a week each. During the time they are employed this is their sole expense. When not employed they have the reputation of doing a great deal of visiting, not only among their friends but among the families in which they have nursed. Of course they are given a welcome. Why not? Have they not helped through a weary and anxious time?

But the question remains, Why should they be treated free of charge by any physician at his office? If asked themselves, it is doubtful whether or not they would want to be objects of charity. However, this is what they become, and no doubt partly through the doctor's fault. I once asked a young colleague why this class of people was on his free list. He was young, handsome and popular, and had any number of this white-capped and aproned brigade coming to his office. He said it was a little tiresome, but "they talk so about a fellow if he charges them, and then they sometimes send a patient."—A Contributor.

New York Medical Times.

Jonathan Hutchinson says that he has long been in the habit of prescribing coffee as a medicine in certain states of great debility. He regards it as a remedy quite unique in its usefulness in sustaining the nervous energy in certain cases. Apart from its general utility, and its well-known value as an antidote to opium, he has found it of especial service after operations where anesthetics had been used, and in states of exhaustion where alcohol had

been pushed and a condition of semi-coma followed. In these latter cases he has sometimes prescribed it as an enema when the patient could not swallow, and with the best effects. In many cases where death may be close at hand, such an expedient as this may even be the means of a permanent restoration to health. Tea and coffee seem to be much alike in many respects, but the latter is greatly preferable as to its sustaining power. It would be a great advantage to our working classes, and a great help toward the further development of social sobriety, if coffee were to come into greatly increased use, and if the ability to make it well could be acquired. As an example of the difference of effect of tea and coffee upon the nerves, the writer notes what he believes many sportsmen will confirm, that it is far better to drink coffee than tea when shooting. Tea, if strong or in any quantity, especially if the individual be not in very robust health, will induce a sort of nervousness which is very prejudicial to steady shooting. Under its influence one is apt to shoot too quickly, whereas coffee steadies the hand and gives quiet nerves.

INSTITUTE IDLINGS.

H. Registrar Aldrich, a Knight of Axar-Ben, of Minneapolis, across the creek from St. Paul, was invited to attend some function. "How shall I array me—in my right mind?" quoth he. "Certainly," was the reply; "bring your dress suit." Which reminds us that while we were doing the Haroun Al Raschid act in Chicago, living quietly and unobtrusively, without prefix or suffix, we took our glasses to Peacock's for repair. "Have to put in a new lens," said the urbane waiter. We said that we hadn't the subscription with us, and preferred to have them simply temporarily repaired. He offered to duplicate the lens as good as any prescription. We said we were physicians and preferred not to have any jewelry store eye-expert fix our prescription. "That shows your unutterable ignorance," responded the gentlemanly clerk; "you're no doctor; you can't work that on me." And like the ancient caliph we slunk into the confusion of State street, pleased that our incog. was so perfect, and amused that the firm of Peacock had such urbane and courtly attendants.

Horace M. Paine in a little stairway chat one day informed us that our frequently expressed wish that the barbed wire surrounding

the State of New York might be removed, was about to be done—so far as the admission of old practitioners was concerned. Some modifications were being considered so that Ludlam and Cowperthwaite and Comstock and Green and Walton and Wood wouldn't have to go back to school for four or five years and re-learn all the rules of grammar and arithmetic and b-o-t-t-i-n-y in order to be able to prove to the New York or any other State Medical Examination Board that they know enough of medicine and surgery to be permitted to practice in New York.

The Hahnemannian Monthly says that Dr. J. Richey Horner of Cleveland was appointed Chairman of the Section of Neurology. We hope this is so. We asked for this appointment for Dr. Horner, knowing him eminently well qualified for the place. But Dr. Wright announced at the last moment that this appointment would be held for the present time.

The Executive Committee will be the Committee on Local Arrangements at Atlantic City next year—with the help of an auxiliary committee of local physicians. This is a move in the right direction. Without any desire whatever to cast reflections on past local committees, we believe that the Institute ought to be in charge of its own affairs at every point where it proposes to meet. This will remove all embarrassments, as it will do away with the assessment of local physicians. And, finally, we will not have to wait—as it may some day prove—for an unwelcome invitation.

Hahnemann Monument Smith was there with his eloquent little speech reciting the beauties of the Monument and making the membership see the need of completing the subscription.

Now, about that Institute flag. Are we to have one soon? How much nicer and appropriate the Millard or the Creighton College or the church would have been draped if the Institute had adopted a flag or at least distinctive colors. Would it be possible to combine the German and French colors—Hahnemann's birthplace and last resting place?

Governor Holcombe made a long address of welcome. It was wholly extempore and showed a good knowledge of the art of medicine, as well as of the Founder of Homeopathy. It made a good impression.

Organon S. Kunzels was called home before the close of the session. His son, even during the few days he was at Omaha, lay sick in bed at the Millard.

F. Griswold Comstock, looking younger and more vigorous than ever, was here to the finish. Hahnemann College of San Francisco has latterly conferred the honorary degree of Doctor of Medicine upon popular and well-known Dr. Comstock. An honor, well and truly bestowed.

Chester G. Higbee telegraphed that the District Court of that State—Minnesota—had knocked out the Examination Board law. So that perhaps in future it will not be necessary for the homeopathic pharmacies and physicians of that State to advertise so many wonderfully fine locations for homeopaths.

It is pleasant to our finical, word-splitting soul to hark back and remember that no one twisted the French very sadly. At least we nowhere heard any reference to the ack-koocher, with accent on the second syllable. The os was a little dislocated at one time, but that was a *lipis lingi*, as one of the members informed us.

Currier, of San Francisco, whose head is bald and smooth enough if left in the sun for a while to tempt a passing eagle to drop a turtle on it, in the hope of cracking it—the turtle, not the head—wants the Institute to come to San Francisco in 1901. He promises big things besides the big trees and bigger stories. California never goes at anything of this kind half-hearted. Ho, for Currier and the Pacific coast in 1901! He's going to try Lydia Pinkham and The Seven Sisters—to cure his hairlessness.

Hugo Arndt telegraphed that he was sick and couldn't come to Omaha. Sorry, Brer. Arndt; you have missed a good meeting. Hope you are recovered by now. *Gesundheit!*

E. P. Anshutz, of the Homeopathic Recorder and the Homeopathic Envoy, did not show up at Omaha, as he had hoped to do. The same is true of S. F. Shannon of Denver.

Very, very sorry that Critique excursion fell through. But, as we understand it, no blame attaches to the Denver promoters. It fell through at Omaha by reason that a competing party made an apparently cheaper rate by let-

ting the members eat at the stations instead of in the dining cars. Brethren, there ought to be more confraternity in such matters. The Critique had gone to much expense in advertising the excursion. They had nothing to gain beyond the hope of making it royally pleasant for the excursion—and they would have done this!

The Materia Medica Conference concluded its labors at Omaha in so far as having independent sessions hereafter. It was moved and carried that the subject-matter be carried on in the Materia Medica Section proper of the Institute, one session of this bureau being given over to this branch. A wise and patriotic move. For thus it tends to unify the Materia Medica men again under one tent, and no longer threatens to set up divisions which are to meet separately and almost independently of the Institute.

The American O., O. & L. Society has also been importuned to come back and not play by itself. There seems to be a disposition on the part of all concerned to do the fair thing in the matter. And perhaps at or even before the Atlantic City session the reunion may be effected.

The Memorial Services, brethren and sisters all, should not be neglected. True, it was very hot on the Sunday night set for these services at Omaha. And, besides, something else was also very hot that Sunday night. But this does not excuse the neglect of this pitiful tribute to our dead. If you do not want to remember our brother of yesterday, who last shook you by the hand in Buffalo in apparent good health and spirits; if the task is become irksome, or seems trivial in the light of the fight on the Presidency, why, look you, the proper thing to do is to lop off the Memorial Services and let the memory of our dead fade out as rapidly as it will. Then we can have more time for electioneering.

Some one (have forgotten who) said in our hearing: "Kraft is down on all shams and hypocrisies in the profession and in the Institute." That is true, thank you! That is the only motive which allows our pen to dip into such matters. Our methods have been misconstrued. We know that now. It has frequently astonished us to receive charges of infidelity both to religion and to the Institute. Nothing has been farther from our purpose.

We have invariably stood up for a FREE homeopathic college—in which nothing but the very best of medicine and surgery shall be taught. We believe as implicitly that the profession of medicine is the equal of any other profession, and that it is belittling to us to turn out that which we are equally competent to perform.

Bushrod W. James was not present. Hence he did not publish to any great extent his committee'ship of the Hahnemann Tomb. But it is very desirable that the American profession shall not ignore this committee. There is money enough in America to complete the Hahnemann Monument now under way, and also some for the tomb of Hahnemann in Pere Lachaise. When we all go to Paris to the International Homeopathic Congress in 1900, it will be pleasant to reflect that we did our little best for the tomb as well as our big best for the Hahnemann Monument. THE AMERICAN HOMEOPATHIST editor will receive subscriptions for the Tomb of Hahnemann fund. This is for the purpose of erecting a suitable memorial, large or small, as the subscriptions may decide, over the veritable remains of our Grand Master.

W. Hustler Hanchett was everywhere and at all times at Omaha. His industry was unceasing. Had he had his full swing several of the little details of the entertainment program would have been better. But no one has complained. The consciousness of the appreciation of the Institute must repay him, for the time, at least.

During the winter season with the windows down the Creighton College building must be an ideal place for a meeting. But the windows up and a stream of teams passing both corners it was at times very difficult to hear any of the speakers. The ack-koo-stics were then not only execrable, but, excuse French, damnable.

An effort was made to resurrect and print the Strickler statistics presented to the Institute two years ago. Dr. Porter stated, in explanation, that the omission was temporary and in the interests of economy, the Publication Committee believing that statistics could wait much more safely than essays on current topics. Some of the members wanted the Publication Committee instructed to publish these statistics nilly willy—some one said—to which

Porter responded that if the Institute establishing the precedent of telling its committee what to publish, it might as well do away with the committee. The Institute required no blue print to see the point, so the matter was dropped.

Hahnemannian Advocate Pierson was there from start to close. He simply attended as a member, and would listen to no suggestion looking to his making new application for admission of his college—The Dunham—to membership in the Intercollegiate Committee. He said he had no application to make. He was satisfied if the Institute was. But is this the proper ending of the incident? Somebody blundered!

W. E. Leonard, of Minneapolis, our secretary of the Materia Medica Section at Denver, was with us, looking hearty and happy. He spoke in a number of the sections and always with good listeners.

L. L. Danforth, in his obstetrical address, recommended the giving of 15 grains of chloral by the mouth, or rectum, to be repeated in twenty minutes where there was excessive pain and delay in a normal labor in the first stage. His address is a valuable one and worthy of careful study.

The exhibitors were present in good numbers. They seemed pleased with the excellent facilities. Chas. J. Branch, the Londonderry man, had an anti-nicotine device, which looks like a bit of burnt match, and is thrust into the cigar at the end where the fire is to be applied. A novel device. As we do not smoke, and Dewey said he liked the nicotine, we have not yet been able to learn of the value of the device.

Dr. Ch. Gatchell was here and was specially honored at the opening exercises at the church by having a poetical composition of his entitled "We Will Not Forget," and which had been set to music, sung by a sweet, clear voice from the organ loft. It was a patriotic song, having reference to the Maine and to Dewey. It was well received and the author called to the platform.

Century E. Fisher was present all the time and did not leave until the meetings were about done. He was a speaker in several of the sections, notably in Surgery, Gynecology,

and the Materia Medica Conference. He does not impress a wayfaring man as being very strong physically. His last illness pulled him down woefully; yet when he gets warmed up to his subject, the old San-Antonio-and-Southern-Homeopathic-Association-Fisher is there all right! His son, we learned, has just been graduated with honors from a military academy.

Treasurer Franklin Smith—in the absence of Brer. Kellogg—was busy at all times either writing out receipts for dues, or hammering away on his Hammond. His organization, registration and statistics work is that which gives the Institute its wonderful prestige with the profession of medicine. It is difficult in the face of the cold facts which T. F. dishes up each year in the transactions to long continue to sneer at the decadence of homeopathy. May he be spared to us many, many years; for he is a good and faithful officer.

Evolutionist C. Price, of Baltimore, had a clever Materia Medica Section. Instead of following the old precedent of a lot of helter-skelter papers, he devised one subject for all his workers, and each member simply discussed his division of it. It was a very original and clever thought and well carried out. He still believes in evolution in the Homeopathic Materia Medica.

Pemberton Dudley came with his bible—the Dudgeon edition of *The Organon*. He said he always carried it with him on his trips to and from the Institute. It was also very evident to those who heard him preside and speak in the Materia Medica Conference that he knew what is in the book—better than some of those who criticised him.

W. R. King, of the Press Committee reported that he had, for the Omaha meeting, exerted himself duly in order to make the different cities take off and publish the Associated Press reports of the Omaha sessions of the Institute. But, he said, with a little sadness in his voice, it is one thing to agree with the Associated Press to send lots of matter, but it is quite another to have the receiving papers accept and pay for it. Ah, yes, Brer. King, that is where the trouble lies mostly. The general newspaper reader cares nothing for our meetings, so the papers do not care to take it off the wires. If some one of their local celebrities runs for an office or does some-

thing unusually clever or damnable they will take that much of it, but rarely more. As Brer. King said, the members must "sit up" with their local papers before coming to the Institute and make them understand the necessity of receiving and accepting Institute news.

We were surprised and pleased to note the dearth of extemporaneous discussions in the Sections. Many of the disputants sent in their written discussions; and even of those who took part many came with the discussion type-written. If this custom should grow, and there seems no good reason why it should not, it would simplify the keeping of the records very much; there would be need for but little stenographic work in the sections; the copy would be well thought out and written out beforehand, therefore would not need to be returned to the authors for revision, thus cutting off the expense of postage. And ultimately it would be a fairer and better arranged discussion than any extemporaneous speech licked into some shape two or three weeks after its delivery. We believe that Van Bunn and Price have hit upon a wonderfully progressive, even though radical, step in the manner in which they conducted their sections. Let us have more of this. Put up one good point and all fire away at that until we know all about it. Then as each man is told off months ahead and knows his place in the section he can take ample time on his subject and read up and write it out until he knows what he wants to say and can say it.

Courtly E. Walton was as happy as any one at Omaha. No kick coming whatsoever. He is a faithful Institutite, abiding by the decision of the ballot box. Always courtly, clever and composed. Better to have loved and lost than ne'er to have loved at all, sir.

It would have done your heart good to have seen Geo. B. Peck back up and stand at bay against the presidential desk and hit back when the report of the Censors was being impugned. We didn't think he would do it, but did. And he did it well. Some one wanted to know if the Censors had been acting all along without a quorum. And the answer came quick and sharp that the Institute when it receives a minority report and adopts it makes a majority report of it. Good point and well put. Again, when somebody wanted an applicant from Dunham College turned

down because Dunham is not a member of the Intercollegiate Committee, he answered that this Institute would not refuse to accept an application from an allopathic college, why should it refuse recognition to a homeopathic graduate. And the Dunham man went in, all right.

Reuben Ludlam was present and held up his end of the line well and truly. As we said in our recent editorial, he is one of the few who seem to gather no age as the years bear them down. Ludlam is to-day in appearance and happiness of diction and speech identically what he was at Saratoga the first time we ever saw and admired him. In the Neurological Section, after having delivered himself of a good speech, he said he had made a long speech because he had not had time to make a short one. Vous pas de leur Rhone que nous, n'est-ce pas, M. le Docteur?

B. Fortunatus Bailey was in his place in the various sessions a good deal and took part in several of the sections. He may lay to his soul the flattering unction that even his worst (political) enemies say that he drank fair, Betsey; that he came out of the scrimmage with clean hands. His majority was sufficient to show how he stood. He will make a good president, and THE AMERICAN HOMEOPATHIST salutes him!

Sarah J. Millsop, our dear Kentucky sister, who is now our new Second Vice President, would make a good President in the event the several impedimenta ahead of her should, as it were, be removed by Providence before the Atlantic City meet. Our "divine Sara" is beloved of her fellow-practitioners, both male and female, being a notable and lovable instance of the proper professional idea in a woman. The Institute loves her and delights in doing her honor.

The paper of Prof. Bailey, of the University of Kansas, on the value of dilute medicines was one of the surprises of the section. It was read in the section in neurology, and when it appeared in print in some of our journals the homeopath who had not lost all faith in dilutions and he who is dangling must read it. It will do him good. It is truly scientific.

We presume that if W. Essentials Dewey had not been already a member of the American Institute he would most likely have been made an honorary or corresponding member.

That's what he gets almost everywhere he goes now-a-days. But he got our good friend, Dr. Mersch, of Bruxelles, in as a corresponding member. We had the pleasure of meeting Dr. Mersch at the London Homeopathic Congress in 1896, and from our acquaintance with him at that time believe that the Institute made no mistake in electing him to corresponding membership.

A telegram of sympathy was sent to R. B. Rush, of Salem. Poor, dear, old Doctor! It must be sweet to him in his hour of affliction to be reminded at least once a year that his brethren hold him dear and have no intention of forgetting him.

H. W. Westover, of St. Joseph, Mo., laying aside his dry-smoke for the time, read a paper on "Urine in Diseases of Nutrition," which was well received. He clearly pointed out the essential points in the diagnosis and made his cautions very graphic.

W. D. Foster, of Kansas City, did not forget his friend, the Governor of Missouri; he had suitable resolutions passed thanking him for his continued recognition of the homeopathic school.

A. E. Neumeister had a bad laboratory accident to his left hand a little while ago, so that even yet it is necessary to wear bandages.

And talking about hands reminds us that George Royal, that royal good fellow from Des Moines, has a bad hand too. Many remedies have been suggested to him, and we hope out of the multitude some practical wisdom may be found.

Brer. M. Dills, also of Kentucky, was full of fun and stories the morning after he and Aldrich and Besemer had been duly initiated into the Knights of Ax-ar-Ben. He went west on the excursion improvised by Le Seure of Batavia.

Globules.

Unjust Criticism.

The Medical Record is quoted by Printers' Ink as saying that the Ripans Tabules ad. was eagerly seized by every homeopathic and eclectic journal with an implied desire for more of the kind—so long as the money was forthcoming. The Medical Record should be ashamed to write such transparent falsehood. The Ripans Tabules folks themselves

publish a pamphlet giving the results of their journals, and distinctly announce that THE AMERICAN HOMEOPATHIST refused to touch the advertisement at any price; and that its publisher, Chatterton, made the same declaration for all his other journals. We also remember that the Hahnemannian Monthly was another of the homeopathic journals which would not touch the bait at any price.

investigation into the gullibility of medical

Podo. and Apis in Dentition.

Podophyllum and apis are two of our most valuable remedies. One is usually regarded as a liver remedy, the other as a brain remedy, and yet the two run a parallel course to a marked degree; the former far more frequently indicated in brain manifestations during dentition than the latter. In my experience podophyllum has no equal in that form of reflex cerebral irritations made prominent during the period of dentition.—C. D. Crank in Trans. Ohio Hom. State Soc., 1897

Heart-Sickening Enquiries.

The commercial value of a medical education sinks into comparative insignificance as contrasted with the development of the powers to advance the interests of humanity, and make the world better for our efforts. I presume there is not a college registrar in the land who is not made heart-sick by the sordid inquiries of would-be matriculates who see in the diploma only a means to further selfish ends.—C. E. Walton in Trans. Ohio Hom. State Soc., 1897.

Preservatio Indefinitus.

Dr. Vansant states that one-tenth part of a one-per-cent solution of formaldehyde will preserve a solution of cocain indefinitely.

Book Reviews.

Hand-Book on the Diseases of the Heart and Their Homeopathic Treatment. By Thomas C. Duncan, M.D., Ph.D., LL.D., Professor of General Medicine and Diseases of the Chest, National Medical College, Chicago. Author of "Diseases of Children and Their Homeopathic Treatment," "Pædohygea," "How To Be Plump," etc., etc. Halsey Bros. Co., Chicago, 1898.

This is not a large book, but it is large enough. It doesn't pretend to be exhaustive in the sense that the author has been to London with a camera and, while hiding his

homeopathic relationship, slip into old-school museums and take snap-shots of pathological specimens. Neither does it quote from all the dead and forgotten writers on hearts, nor does it give over any of its space to the fulsome and nauseating laudation of a few foreign celebrities in this specialty. This is an American book, written for the American by an American. It is to the point, and makes its point on every page. The introductory chapter, to a busy practitioner, is worth almost the price of the book. It gives "A Clinical Outline" which is easy of absorption by the busiest of practitioners in a few moments of rest between patients, and the phraseology here, as all through the book, is of the plainest and most practical. Dr. Duncan is a practical man talking to practical men. He is not given over to much wordiness, nor to that other silly pretense of over-learnedness. It is a good, straight-forward story of the heart, in all its varied relations to the general practitioner. The author has given enough time and attention to each of the commonly known diseases and functional disturbances of the heart to satisfy any general practitioner. His resume of homeopathic medication is clear and bright and trustworthy. His directions for diet and care and general therapeutics are the work of a well-informed practitioner and teacher. A chapter on "Review Questions" is a valuable addition, since it gives the doctor an opportunity to quiz himself on the most essential points in the treatment of hearts. We feel sure that the little book will meet with great success, because it is practical, because it is direct and to the point, and because it is unmistakably honest and homeopathic. Send for a copy and see if we have not spoken truly.

"Club Life and Woman's Review," published in Quincy, Ill., has for frontispiece an excellent portrait of Dr. Donna Parker. Dr. Parker is the wife of Dr. James W. Parker, with whom she became united in marriage a few months after both had been graduated with honor by the state university of Iowa. The sketch accompanying the portrait has some very pretty things to say of Dr. Donna, as she is familiarly called among her many patients.

The American Homeopathist.

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FRANK KRAFT, M.D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



D. Y. CAHIL, M.D.,
Salem, Mass.

In the current Clinical Reporter we note a letter from Prof. Dr. A. L. Boyce proposing an addition to the practical teaching-work of the Homeopathic College of Missouri (St. Louis), which marks a distinct advance in the line advocated. Dr. Boyce, to shorten up his letter, putting it in our own language, has rented a house at 2330 Papin street, in which obstetrical material will be collected for the

the past year special effort has been made by the faculty to furnish seniors with these practical opportunities, and but one or two have failed to be participant in at least one obstetric case. Dr. Boyce has now succeeded in making arrangements with a colored woman who has a great reputation among her people as a use of the senior class of the college. During midwife to permit the presence of the students at her confinements. The rented house—rented and turned over to her by the college people—reserves the front room for the exclusive use of the college authorities, the remainder being at the disposal of the midwife. The college room is comfortably furnished with sleeping accommodations for two students, in order that they may be on hand when wanted. These furnishings are the gifts of individual members of the faculty and profession. The class is drawn upon with impartiality.

We believe this to be an excellent idea, especially in that it draws its obstetrical material from the lower class of colored people, where it will work no injury to the legitimate business of the medical profession. This is naturally a grand desideratum, since it not only furnishes the needed practical work for the student, which most of the State laws now require before admission to practice, but it does it in a way both novel and not injurious to the doctors. We all of us know that the presence of the free college clinic, the free hospital, the free maternite, and the free dispensary play sad havoc with a young man's practice. We therefore congratulate our alma mater on her happy solution of the vexed problem of Free Medical and Operative Services, and hope not only that it will prove eminently successful in this instance, as it deserves to be, but that it may in this or in some kindred form be adopted by other of the homeopathic colleges.

A STUDY OF SAW PALMETTO.

WILL SCOTT MULLINS, M.D., LOUISVILLE, KY.

In October, 1891, through the medium of *THE AMERICAN HOMEOPATHIST*, I presented to the medical profession a series of clinical cases cured by *sabal serrulata*.

Again in 1892, at the session of the American Institute of Homeopathy, I had the honor to present the first and only thorough proving of the drug upon a healthy female. In closing my article I said then: "I am not a prophet, neither am I a seventh son of a seventh son, but I opine that in saw palmetto you will find a vigorous child running over with vitality, and it will live in the memory of man long after we are all laid away in the silent tomb, and the drug will take its place as an honored member of our *materia medica*, the peer of any drug in its power to alleviate and cure human suffering when applied according to the law of *similia similibus curantur*."

Six years have come and gone since the above prediction was made, and hundreds of symptoms given in the proving read before the *materia medica* section of the American Institute have been, by different physicians in this and European countries, fully verified by clinical applications—the only sure test of any drug's merit to the true homeopathic physician.

There can be no more interesting and profitable study than that of drug action, for without a thorough knowledge of *materia medica* can any homeopathic physician ever expect or hope to gain patronage and win laurels over his old-school competitors. A thorough knowledge of any drug action and how to apply the same to morbid conditions as expressed by the totality of the symptoms is in reality the great gulf that separates the homeopath from the allopath.

Prescribing according to the most perfect photograph of the symptoms of a diseased condition as reflected in the drug prescribed. This was, and is, the foundation stone upon which the fathers of homeopathy builded so well and wisely. The divergence therefrom to-day, the attempts to find a shorter and easier road to renown and success, has had much to do with the many skimmed-milk and pathological freaks now in our ranks, who claim to be homeopathic physicians. Out with such mongrelism! Such would be spewed out of

the mouth of a first-class eclectic. But I diverge as I indignantly think of how homeopathy has been covered with disgrace and dishonor by men either too brainless to find and retain, or too lazy to study and apply, the potentized energy that lies latent in drugs, only gladly awaiting master minds to use them in diseased conditions strictly according to our law of cure.

"Better is the reproof of a friend than the kisses of an enemy," runs an old and truthful adage, hence I trust that no Kentuckian in this society will shoot me on the spot when I say that a few years ago, when this society met in Louisville, a very short paper was read on saw palmetto, giving a very meager account of its application in certain forms of urinary troubles. And I blush to record the fact, the writer, excepted, not a single member present knew enough about the drug to discuss it at all in an intelligent and instructive manner. Before that meeting I made the statement that saw palmetto, in my hands, given in ten-drop doses before meals and at bedtime, had cured a hundred cases of sexual weakness in men, when given according to the following indications: Depression of spirits, lack of mental vigor, a general letting down of the nervous and muscular system, associated with an enlarged prostate, with throbbing, aching and dull pains, weakened sexual power and loss of thrill.

Saw palmetto in impotency, when given as stated, will never disappoint you. In cystitis and irritable urethral troubles in females, which has been produced by her soft fingers lingering too long in caressing the clitoris, you will find it an excellent remedy given internally and by injections of ten drops to the ounce of warm water.

In reflexed headaches, from ovarian and uterine irritations or disease, it ranks with *sepia*, *sanguinaria*, *bell.*, etc. The patient will complain of sharp pain on top of head, running down and across the forehead, worse in right temple; with this condition there will be pain across the lower part of the back, heaviness of the abdomen and stinging pains in right ovary. Its indications in threatened or mammary abscess are: Glands feel sore, very tender; sharp, cutting, radiating pain in the gland; nipples sore. In abscess of the breast the discharge is creamy in color, slightly brownish, with a faint odor as of starch. Apply tincture on brown sugar locally, and give internally 6th to 30th attenuation.

The drug has a wide range of action in ovaritis, endometritis, flexions and prolapsus uteri. Its indications are: sharp pains in right ovary, running down to thigh; breast sore and tender; pain in temples and forehead, worse in right side, in afternoon and after-part of night. An uncomfortable feeling all over the body, with stinging pains in the abdomen, in front, low down; slight pains in the top part of the head, and severe stinging pains in right ovary. Discharge from vagina yellowish white, smelling like semen.

As aconite has been fitly termed "the homeopathic lancet," so saw palmetto has been named by me "the homeopathic tissue builder," for it is marvelous in its action when given to the unnaturally thin person. And a person who is lean because of some grave chronic disease, can gain from ten to forty pounds by the use of saw palmetto. This is true of persons who have been thin during life and are descended from lean ancestors.

It improves the appetite promptly and effectually and increases the weight very quickly. It increases the strength of weak, debilitated, anemic persons more quickly and thoroughly than any preparation of iron, quinine, hypophosphites or cod-liver oil. It invigorates the digestive processes quicker and better than pepsin or caroid. In this condition it is best to begin with ten-drop doses in one-third of a glass of water before meals and at bedtime, rapidly increasing the amount until the dose reaches two or three spoonfuls in a glassful of water four times a day.

It is not, however, safe to give it for this purpose in females, as upon them it quickly shows a marked pathological effect, producing many unpleasant symptoms of uterine and ovarian origin.

This has been given to you for your most careful consideration, hoping that each of you will make yourself well acquainted with its wide range of action by consulting my proving of the drug in 1892 "Transactions of the American Institute," and also a careful reading of the monograph on saw palmetto by my friend, Dr. E. M. Hale, of Chicago.



An Obstetric Note.

Dr. Wells emphasizes the fact that all rises of temperature of whatever nature, following labor, demand immediate attention. If there is a suspicion that the fever is due to septic infection, no matter how slight it may be—and this is manifested by the condition of the pulse,

local abdominal symptoms, sweats, etc.—the uterus should be thoroughly flushed with copious antiseptic douches, or, better still, should be gently curetted with a drill curet. Great care must be taken not to perforate the organ, as it is always more or less soft at this time. It is Dr. Wells' usual custom in the Polyclinic service to follow the curettage with a uterine suppository containing forty to sixty grains of iodoform in cocoa butter, and a slight vaginal pack of sterilized gauze.

SYPHILINUM.

J. W. KIRCHBAUM, M.D., Louisville, Ky.

The claim that in the beginning God created heaven and earth, light and venereal diseases, would seem to have some foundation, when we consider that about one person in every fourteen has syphilis, either hereditary or acquired. This is my excuse for calling your attention to a remedy made from the virus of this dread disease.

I am aware of the fact that many homeopathic physicians object to using the nosodes; some argue that with the exception of psorinum we have no provings of these remedies, strictly speaking, others that their administration leads to the pernicious habit of prescribing for the name of the disease—syphilinum for syphilis, medorrhinum for gonorrhea, tuberculinum for tuberculosis, etc., etc., but in my opinion, this need not be the stumbling-block that our friends would have it. Syphilinum may be indicated and accomplish curative results in patients who have never had syphilis, if the totality of the symptoms present call for it. On the other hand I will concede that our attention is often first directed to the remedy, by the manifestations of the disease from which the nosode comes, the disease being either openly apparent or partially disguised through a long experience of suppressive treatment.

In the mental sphere we find it encroaching on several sister nosodes. Here we have the same deep melancholy that belongs to psorinum—the fearfulness and apprehensive mood and the loss of memory for passing events. Under syphilinum the happenings of yesterday may have vanished from the mind, but your patient can describe with elaborate minutia some trivial event that occurred twenty years ago. Syphilinum is especially averse to adding up figures. A column of accounts drives him distracted. He fears insanity and needs frequent reassurance on that point. The

headache that belongs to this remedy is deep, and by that I mean that the trouble has to do with the bones and periosteum. The pain is sharp and shooting; the brain feels sore. In children you have fearful outcries during sleep.

Now the sleep of syphilinum is peculiar by its absence. Again we see that marked characteristic of the nosode generally, "All symptoms worse at night." Psorinum wants to eat during the night. Syphilinum wakens about midnight and sleeps no more. The pains are erratic, increasing and decreasing gradually. The patient finds it impossible to remain in one position for five consecutive minutes; the night becomes a horror to him. Here it comes pretty close to the absolute sleeplessness of sulphur. When syphilinum does sleep, he awakens unrefreshed, exhausted and in intolerable pain. The hair, when syphilinum is indicated, falls out in patches, which fact, taken in conjunction with a few of the prominent skin symptoms, often observable, is a valuable guide, and points to this nosode as the remedy.

Further, syphilinum has deep-seated ulcers and abscesses, with extreme emaciation. Caries of the hip joint or spine, with the characteristic pain. The heart also may be involved, and we have cutting, lancinating pains from the base to the apex. It is a small point to remember that under medorrhinum the pain runs in the reverse direction, but it is often the small difference in drug selection that separates a cure from a failure.

In the new-born child of syphilitic parents prompt and careful medication frequently averts grave trouble. About the sixth week in the life of a restless, crying baby a loss of appetite occurs, the sleep grows disturbed, the bowels become irregular, and it has "snuffles." Emaciation, of course, succeeds as a result of malnutrition in general, and the child is reduced to almost a skeleton. The skin of the face shows the characteristic discoloration, and is drawn tightly over the bones. The eyes grow very prominent, seldom sunken. The voice sets up a hoarse, feeble moaning from implication of the larynx, and all necessary proof is present of the syphilitic taint. In a case like this syphilinum may be found extremely valuable.

Again, older children who were once bright and quick to learn, now show marked deterioration, mentally and physically. Their mentality appears to be stunted or arrested in development, their skin grows dry, harsh

and scaly, and we have evidence of some deep, underlying constitutional dyscrasia. Here, too, syphilinum may step in and change the whole character of the case, by sweeping aside the indefinite and bringing to the surface a train of symptoms which leads us with greater exactitude to the similimum.

The appetite under all the nosodes is peculiar. A typical psorinum patient has most objectionable cravings. Syphilinum runs a close second in abnormalities of eating and drinking. Alcohol is craved immoderately and salty and sour food is indulged in.

Of course you will find chronic constipation, fetid breath, and great offensiveness of all the excretions. This, too, is a peculiarity of the nosode family. The leucorrhea of syphilinum is yellow, watery, offensive, and so profuse that alumina is suggested.

The nearest relative, perhaps, that we can associate with syphilinum outside of her particular confreres, psorinum, medorrhinum, tuberculinum, etc., is kali-bich. Indeed, they approach so closely, in many instances, we might almost bracket them as complementary. As an instance of this I would crave permission to close with a case that recently came under my care:

An old gentleman, sixty-nine years old, sanguine temperament, presented himself for treatment, and in the course of my interrogations gave me what I considered a very pretty picture of the asthma of kali-bich—the tenacious stringy mucus from the throat, the puffiness of the eyelids, the constant lachrymation, etc. I questioned the old gentleman as to his past, and gained a reluctant admission that he had had gonorrhea forty-five years before. Unable to substantiate my suspicion of syphilis, I summed up his symptoms and prescribed kali-bich.¹⁴⁰⁰

That was on July 30th. Early in August he returned much worse, and added to his previous story the fact that he knew he was going to die, there was nothing in medicine for him, he had ordered his coffin, and was prepared for the worst. His nights, he affirmed, were simply intolerable. He choked and coughed from midnight till daylight, and was tortured with pain. I gave him syphilinum cm. On the 10th of September I heard from him again, and the report surpassed my expectations. Every troublesome symptom showed decided improvement. He was now able to sleep lying on his back, a feat hitherto impossible; the suffocative attacks had entirely ceased, his deep melancholia had to an extent lifted,

and my patient was enthusiastic. I subsequently repeated syphilinum in a higher potency and the old gentleman now regrets his premature investment in a coffin.



A Verified Symptom of Podophyllum.

In the physiological study of a remedy we are more attracted and impressed by its general action. With podophyllum it is the intestinal and digestive manifestations, unmindful of other symptoms, which may be key-notes in the selection of the remedy. But even in intestinal troubles with the infant, with podophyllum we are apt to overlook its many healing virtues. Whenever the nurse tells me "the little bowel comes down" I invariably think of this remedy. In our college clinic during the past several years I have prescribed podophyllum upon this one symptom, often awakening the enthusiasm of the class by the almost invariable cure. Large, frequent, watery stools, worse in the morning, accompanied by an odor which almost drives us out of the house with prolapsus ani, call for podophyllum. The color of the stool is too variable to count on. Pain is as apt to be absent as present. When accompanied by flatulence, which is frequently the case, there is pain just before stool, and the movements come with a rush and gush (very like croton-tig.); then we observe the characteristic "meal sediment." Many times the stools are too large and too frequent; otherwise they are natural. The eruption on the abdomen in the case described is not unusual. Sometimes it is so well marked as to suggest to the nurse, if not to the doctor, the possibility of an eruptive fever. —C. D. Crank in Trans. Ohio Hom. State Soc., 1897.



Two Infrequent but Excellent Remedies.

From the Homeopathic Recorder (copying from the Eclectic Medical Journal) we learn that sticta pulmonaria is of homeopathic origin; that its chief indication is the pain in the back and shoulders, extending up through the neck to the back of the head. It is found indicated in many cases of rheumatism, bad colds, and to chest troubles. It is one of the remedies which the eclectic writer always considers when about to prescribe for cough—and particularly in chronic cough—when it is dry, rasping, wheezing, persistent; it will be of good service in the hay fever

cough, so common to many parts of the country in July and August.

Euonymus atropurpureus, referred to in the Homeopathic Recorder article quoting the Journal of Medicine and Science, has a wonderful effect on the secretory functions of the kidneys. It increases the secretions somewhat, but not enough to claim the rank of a diuretic per se, but it will remove albumin from the secretions almost completely in a very few days. It has some anti-rheumatic properties, as have all remedies that affect the kidneys. One of the leading symptoms is a peculiar backache, which is in reality more of a soreness and tenderness than an acute ache. Most patients will say that it feels as if they were lying on a hard roll of cloth under the small of the back. The writer mentions the case of a woman of thirty with chronic kidney trouble; he was called to the case three weeks after her confinement with fourth child. Bowels constipated, kidneys working poorly, vision and breathing disturbed, with every symptom of pronounced uremia. Had the roll-of-cloth backache. Urine showed 35 per cent of albumin. Cured with euonymus and some other indicated remedies.



Pil. No. 50.

The Homeopathic Recorder.

Like our late Dr. Holcombe, the writer of the above believes that euonymus is a good remedy for Bright's disease, though he has never tried it on a fully developed case, but has been able to check every incipient case with it. As far as the soreness and tenderness of the back goes, I could cite hundreds of cases, mostly females, who have been promptly relieved, and as nine women out of ten have more or less backache, you will see, doctor, what an opportunity this remedy gives you to get on the good side of the ladies! The wahoo backache differs from the helonias backache, in that the helonias has a dragging and bearing-down sensation toward the uterine organs and associated with an atonic condition of the same; in other words, helonias is indicated where the uterine organs are the cause of the backache, while wahoo is called for where the back is the chief offender and the surrounding parts only act in sympathy.

[In a preceding paragraph in this quoted article the backache is designated as "a roll of cloth under the back," the soreness and tenderness extending up the back into the neck.

by coming to distinguish the bacillæ given above from that of others, which is better when having a hard surface pressed against the back.

The Atlantic Medical Weekly.

The large fees charged by the surgeon are out of all proportion to the fees obtained by the medical man. This should not be so, and what is more, it need not be. Do not misunderstand us to say that the surgeon should work for less pay, far from it; but the doctor who is called in charge of a case (say of appendicitis), that has the requisite skill and knowledge to make an absolute diagnosis, and to recognize the necessity for making an operation, and is honest and magnanimous enough to call in the surgeon, should stand upon his dignity; the physician and surgeon standing shoulder to shoulder in the case, each sharing equally in the credit that may follow the operation and successful termination of the case, and what is more, a charge should be made that should in all cases be equally divided between the physician and surgeon.

Again, the present custom of charging so much a visit is absurd and savors too much of the livery man who charges so much a mile for his team and driver. * * * The doctor is called in to attend some trivial case that extends over a period of say two weeks. During that time he makes perhaps ten visits, and if he charges \$2 a call, presents a bill of \$20 * * *

He does not worry, has no anxiety about the final results. Again he is called, this time it is a case that taxes his utmost skill; he gives to the patient, as it were, his undivided attention; he is in a state of continual solicitude respecting the severity of the case and the uncertainty of its final issue, and brings to bear all his knowledge and skill acquired by years of study and experience. At the end of twelve or fifteen days he brings the case to a successful termination, and finds, perhaps, that he has made fifteen visits, which at \$2 a visit would amount to \$30. Would that be a just recompense?

We think not. Should the surgeon or specialist be called to a case along the lines of his operative or special work, that demanded the same amount of skill, and the patient's condition was as critical, \$300 would be considered a small fee. Such being the case, why should the general practitioner, or rather the medical man, be put off with the paltry fee of \$30? We contend he should not be. When the medical man will rise up and stand upon his dignity, and demand

his just dues, he will get them and not before. his just dues, he will get them and not before. number of the profession rushing into surgery and the specialties, and the surgeon and specialist will not be the only men who "ride in the band wagon." A. B. B.

The Medical Counselor.

Says Dr. B. F. Bailey (Lincoln): Iodoform is a new remedy, at least comparatively new, in meningitis, and to my mind is likely to be just as serviceable in one form of meningitis as another, although it was first introduced as a remedy in tubercular meningitis, a disease, the diagnosis of which must always be very much in doubt. In the *Review Internationale*, Dr. Martel reports seven cases cured, two used iodoform, three ounces; vaseline, two ounces; having shaved the head, rubbed into the scalp one-half drachm twice each day. In the February, 1896, number of the *North American Journal of Homeopathy*, the late Dr. William S. Miner, of New York, reports one case where iodoform ointment, as recommended by Dr. Martel, cured a case of traumatic meningitis which had been treated with iodoform 6x internally; it cured a third case, apparently tubercular, treated first with the 6x of iodoform and later with the 2x of iodoform, without result, but finally cured with inunctions of iodoform ointment after having been absolutely given up to die by eleven physicians, three of them being among the first men of New York.

In the December number of the *Hahne-mannian*, Dr. W. J. Martin, of Pittsburg, Pa., a man in whose judgment I have most implicit confidence, reports two cases of probable tubercular meningitis cured with iodoform 2x.

New York Medical Journal.

The following incident has come to our knowledge: A medical man, while walking down Broadway on the morning of the 24th inst., saw a crowd collected about a wagon near the Thirty-third street station, and, on approaching it, found a sick or injured man in the wagon with two policemen rendering assistance. Other policemen were round the wagon without making any attempt to clear the crowd away or clearing the wagon of the empty casks and boxes it contained. The patient might, so far as appearances were concerned, be either recovering from an epileptic attack or be suffering from syncope—from general appearances, probably the latter. The

medical man introduced himself as a physician and volunteered his temporary assistance so long as needed, or until the police surgeon or some other practitioner could be summoned if found necessary. His offer was ignored, and the policemen proceeded with their measures for the relief (?) of the patient by dragging him up into a sitting posture till his head fell forward over his neck, the collar not being loosened, and trying to force water down his throat out of a cup. A packet of some white powder was brought and some of it forced into his mouth; he was raised by the shoulders and dragged along the bottom of the cart, his legs doubling under him, and was finally laid down at the wrong end with his head near the seat, instead of the other way about, where he would have been fully exposed to the air. The physician, finding his remonstrances unheeded and his aid contemptuously ignored, finally left in disgust. It is clear from the foregoing narrative that there are two points upon which the police of this city, or at least some portion of them, stand in urgent need of instruction—viz., first, some knowledge of the principles of first aid to the sick and wounded; and, secondly, that when others technically competent to render skilled aid are at hand in emergencies, the police incur a more than ordinarily grave share of responsibility for refusing to accept it. An error of judgment on the part of a bystander who endeavors to the best of his knowledge and ability to render aid to an injured person, even if it should be just what ought not to be done and result in death, could not be condemned; but if in the presence of those who are technically competent, legally responsible, and willing to render skilled aid, he persists in his malpractice, his conduct is little short of criminal, and, in the event of evil resulting, he should be held to answer to the charge.

The Pacific Medical Journal.

Of no less importance is the question of medical advertisements in newspapers. Everybody knows that even in so-called first-class papers vile and disgusting advertisements can be found in their columns. We are pleased to note that there are some papers who think more of the cleanliness of their pages than of the few dollars which come from such a questionable source. The Redlands (California) Citrograph has put itself on record on this subject, as will be seen from the following from its editorial columns. It goes without saying that the Citrograph will receive the

support of every clean-minded person in Redlands. The following which we quote from its columns speaks for itself:

"Another 'Weak Men' advertisement comes to us this week for publication. We are asked to fill out the contract at our own figures. The blank is too small to hold our figures. The ad is not acceptable at any price. This class of advertisers are all fakes and humbugs, liars, swindlers and thieves. We will not be a party to their fraud. If you are sick or ailing go to the best regular physician of your own neighborhood and let the quacks severely alone if you value your health."

New York Medical Journal.

But where we should have expected most from Mr. Owen's paper ("The Young Practitioner and the Sick Child," in St. Mary's Hospital Gazette) we are somewhat disappointed. On artificial feeding, and in the wholesale condemnation of artificial foods, he is very strong. "When I see," he says, "a miserable anemic child, with a large head and pinched face and chest, a distended belly, big-ended bones and deflected limbs, I know that the child has been reared upon condensed milk and other artificial foods." He tells us all about what we ought not to do in the way of artificially feeding infants, and incidentally remarks: "You will notice—your physiological education will have directed your attention to it—that the Creator intended that the milk should always be given quite fresh—'alive,' as it were. It was not even to be stored away in any vascular receptacle, like the bile, for instance, but was to be secreted just as, and when, it is wanted. The sailor in the Arctic Circle, who subsists on a diet which is perfectly 'physiological,' except for its want of fresh animal juices and fresh vegetables, sickens and dies of scurvy." But he does not tell us what we are to do when the mother either can not, for the sake of herself, her child, or both, or will not, nurse her child. To be sure, he makes a vague reference to fresh milk as a princely diet—meaning thereby cow's milk; but what with milk as a mode of conveyance of diphtheria, milk as a mode of conveyance of typhoid, the difficulties of milk composition in all its various aspects in relation to human milk, etc., we are left by the author just when what we most need is light. Even our efforts to "humanize" cow's milk have to bring us into the clutches of the condemned manufacturer. We await a series of "Do's" from Mr. Owen to counterbalance the bare negation of his therapeutic protestantism.

ADDRESS IN MEMORY OF THE SENIORS.*

H. F. BIGGAR, M.D.,

Cleveland, Ohio.

But for the dead I would not bind
My soul to grief—death cannot long divide.
For is it not as if the rose had climbed
My garden wall and blossomed on the other side?

This is not a season for sorrow, but for praise and rejoicing. Death is not the King of Terrors. "We have learned even by the lifeless forms of our dead to smile through our tears—instead of the gloomy crape we wreath the door-bell with sweet flowers, whose pure faces are expressions of hope and love."

Death and decay are essential; they are blessings; they are the evolutions in nature. Do we not see it every season in the leaf, the bud, the blossom and the fruit? And when the parent tree has served its three score years and ten of usefulness, decay and death follow, might we not better say change, for no particle or molecule is ever lost. Sleep is tired nature's rest, and when life's race is well run, when life's crown is well won, this dreamless sleep should always be a joyous welcome; for who would live away, who would ask to stay where storm after storm rolls high o'er the way?

"Sleep is our sweetest earthly comfort. Is there a more delicious sensation than comes from the falling of tired eyelids upon tired eyes?"

What would we give to our beloved?
The hero's heart to be unmoved?
The poet's star-tuned harp to sweep?
The patriot's voice to teach and rouse?
The monarch's crown to light the brows?
He giveth his beloved sleep.

Futurity is not to-night for us to consider or even speculate; "we do not seek to cast our line into the fathomless, nor to measure the measureless, for we know that he who asks doth err—and he who answers errs."

"It cannot be that earth is man's only abiding place, it cannot be that our life is only a bubble, cast up by the ocean of eternity to float a moment on its waves and sink into nothingness, else why these high and glorious aspirations which leap like angels from the temple of our hearts, forever wandering unsatisfied? Why is it that the rainbow and clouds come over us with a beauty that is not of earth and then pass off to leave us to muse on their loveliness? Why is that stars which hold their festival around the midnight throne are set above the grasp of our limited faculties, forever mocking us with their unap-

proachable glory? And, finally, why is it that the bright forms of human beauty are presented to our view and taken from us, leaving the thousand streams of our affections to flow back in Alpine torrents upon our hearts? We were born for a higher destiny than earth, there is a realm where the rainbows never fade, where the stars will spread out before us like islands that slumber on the ocean, and where the beautiful beings that pass before us will stay forever in our presence.

Some there may be, who think that doctors are a sect of infidels or even agnostics—if infidels, I have yet to know them, and I do not think agnostics, for is it not true, that one is only such when in health and when there is no need of a physician nor the clergy?

To-night we wish to pay tribute to the worth and memory of those of our fellow seniors who have gone before since the last gathering of this Institute. We miss the familiar forms and faces of those who have been accustomed to meet and greet." Their associations were profitable, for we felt enriched by their words of sound practical thought; they were pleasant, for they strengthened the bonds which bind us together in common fraternity. However, we must confess that there is a tinge, if not a large measure of sadness on this occasion, "for life would be very pleasant but for its pleasures."

"Many happy and joyous memories of their past lives sweetly linger about the names of our late fellow-members who have been called from this earthly bliss." It needs no tongue to utter their praises, nor swift pen to write their eulogies; they need no monument to record their many glorious deeds of usefulness, for they live in the hearts they have left behind.

They were men for whom one is better for knowing. Like the pious, devoted and sainted Chas. Lowder, of whom it is said that one was always the better for seeing his face. So it was with those whom I personally knew of these departed seniors. These men fill graves, but there are graves between the sky and the earth, above ground, which cannot be filled.

They were great, for the great are those who serve, and they were great, for it is indeed great to be great when old. They were not hoarders of money, but riches to them was in good deeds. They preferred to have their reward in the gratitude of their patients. Their lives were symmetrical, equal in length, equal in breadth, and equal in height. To them,

*Delivered before The American Institute of Homeopaths at Omaha, June 26, 1898.

All places are palaces, and
All seasons summer.

Care or guilt had not deformed them, God be praised;
Tasks and trials but informed them, God be praised;
No one had been a base self-seeker, God be praised;
With the milder they were meeker;
They had made no brother weaker, God be praised.

Those of this noble band were true types of representative physicians. They were veterans in their work, they went into the study of homeopathy with zeal—they loved their profession and their brethren—persons of integrity and uprightness and of estimable worth.

Fitted physically and constitutionally for their great work, not given to excesses, their physical systems could endure the heavy work of the pioneers. Schooled early to deprivations, disappointments, denials and adversities, all of which stimulated the perseverance of strong and healthy natures, and roused their energies and developed their characters, they were respected by even their strongest opponents, always unyielding in what they thought was true and right, and their stern adherence to right won respect from many.

They were brave, earnest, valiant and conscientious workers in their profession; faithful in their chosen calling, they were ever zealous. They were among the early pioneers who braved the ridicule of the arch scoffers, for their convictions were in accordance with truth and their belief. They were heroes, they fought the battle nobly and with victory. When attacked they defied their assailants and cried to their adversaries:

Come one, come all; this rock shall fly
From its firm base as soon as I.

"These were the persons who lived the doctrines which they preached, and some were the most able expositors of the homeopathic law, some had more than a national reputation, they were known wherever homeopathy is known." They were unremitting and arduous in their labors, remarkable in their abilities and professional genius; they fitted into the exigencies of the times; they were sincere in their belief.

As down in the sunless retreats of the ocean
Sweet flowers are springing no mortal can see,
So down in their souls the still prayer of devotion
Unheard by the world rises silent to Thee,
My God, silent to Thee—
True, warm, silent to Thee.

As true to the star of its worship though clouded
The compass points steadily o'er the dim sea,
So dark as they rove through this wintry world
Shrouded,
The hope of their spirit turns trembling to Thee,
My God, trembling to Thee—
True, fond, trembling to Thee.

They were earnest and vigilant workers, of

unusual culture and reading. Mind and heart were blended to an unusual degree in the makeup of these heroes. Endowed with intellects that fitted them as few men are fitted, they were giants among men in ability and friendship. Their minds were above the narrow strifes of men, and incapable of a thought that was petty or ignoble; they lived for those who loved them, and in so living they gave their own personality of charm that caused them to be loved of men as few men are loved. Though they had not all attained the lengthened span of life, yet they had more than attained those years by their deeds of usefulness. They believed that man is most happy whose soul is attuned in harmony with all that is noble and pure and good in life, and longed for the time when in every fellow practitioner they should find a brother, a counselor, a scholar and a gentleman.

They were heroes, for they did the right thing at the right time, and they well knew that the life of their heart gave light to their head.

They had not only talent, but purpose, not only the power to achieve, but the will to labor.

They were born for higher things than to be the slaves of their bodies. They had a mission to perform and they did it well, true types of physicians doing all the good they could. They were consecrated to their work. They had faith in the law of cure and they gave daily evidence of their confidence in that law.

They belived with Bonny that "Homeopathy is the spiritualization of thought in the medical profession, and of all the professions of medicine it stands first and foremost, most conspicuous, most useful."

They sincerely believed Homeopathy "confides every man to do his duty," and "they simply tried to do their duty every day, hoping that when to-morrow came they would be equal to it." Duty is the grandest word in world, it is the cement which binds the whole physical, moral and intellectual edifice together. It is greater than charity, it is greater than love. Before it all material conquests appear of little worth and the lustre of all military glory grows dim.

The high calling of the physician is one of the noblest and grandest professions. None can surpass it, none can equal it. It affords opportunities to exercise all of the ennobling qualities of that which is true and beautiful and good. "What are other professions or vocations in comparison with the inestimable

value and importance of the very lives of these fellow-men who everywhere move and breathe and speak and act around us? What are any, or what are all these objects when contrasted with the most precious and valued gift of God—human life? And what would not the great and most successful followers of such varied callings give out of their own professional stores for the restoration of health and for the prolongation of life—if the first were once lost to them or if the other were merely menaced by the dreaded and blighting finger of disease? It is a noble profession. It makes good men better. Are we not proud to be members of the same profession as the gentle and kind-hearted author of "Rab and His Friends," or the Hero of a Doctor of the Old School," who was always and at all times willing and ready to respond to the calls of the suffering, as was Weelum Maclure, so self-forgetful and so utterly Christian; or of that philanthropic hero who is so beautifully portrayed by Balzac in "The Country Doctor"?

They were benefactors. If he is a benefactor who plants a tree, which gives such beauty and shade and protection, how much more is he, who by his learning and skill and experience, not only a benefactor, but a saviour to those whom he restores to health.

What triumph over disease and death, what joys to many homes. More worthy than many who wear bravery medals or whose breasts are decorated with the insignia of The Legion of Honor or whose brows are encircled with the laurel wreath.

At the death of a maker of a 1,000 bells, at a certain hour these 1,000 bells were rung, not only commemorating his death, but in joyful response to the sweet vibrations of the musical sounds of perfect bells. How many thousand living tongues are constantly singing the praises of these good doctors, who have brought joy to so many homes by their watchfulness and skill?

Pliny says: "Nature has given to man nothing of more value than shortness of life." He should have said: "Nature has given to man nothing of more value than a life of usefulness." Then the longest life would be too short.

A young girl at school wrote to her father: "I always thought that wealth was the only thing necessary to make one happy; but when I know so many of your friends who have such great wealth and who are not so very happy, I doubt if riches are the only requirement to make one happy. Then I thought it must be

education; but when I know so many of your friends who are profound scholars and yet not happy, I conclude that knowledge is not the all-essential to happiness. Is it not, dear father, to be useful which constitutes the greatest happiness?" The great problem of life had been early learned by this dear child. With riches and wisdom, usefulness may be more extended, but riches are not the *sine qua non*. It is the bubbling stream that flows quietly, the little rivulet that runs along day and night by the farmhouse that is useful, rather than the swollen flood, or the roaring cataract.

A man's true wealth is the good he does in the world. If not an alms, a kind and gentle word. "A poor man with a single handful of flowers heaped the alms bowl of Buddha, which the rich could not fill with ten thousand bushels."

The only pleasure that never wears out is that of doing good, and good actions are the "invisible hinges of the doors of heaven."

Upon life's lengthened thread they strung like beads,
The precious jewelry of kind and gentle deeds.

The Englishman said that Punshon could not help but preach well, for he was filled with the Holy Ghost; so these men could not help doing good, for they were enthusiastic workers and their ambition laudable.

They have offered up their lives, and willingly bestowed their talents in aiding and comforting the suffering. "Greater love hath no man than this: that a man lay down his life for his friend."

"Did you ever think what it is that promotes the most and deepest thought in the human race? Not learning; not the conduct of business; it is not even the impulse of the affections. It is suffering. The angel who went down to trouble the waters and to make them healing, was not perhaps entrusted with as great a mission as the angel who benevolently inflicted upon the suffering the disease from which they suffered."

Wearied and worn they are now at rest in sleep. Homeopathy has lost faithful and able representatives whom the Great Reaper has garnered—shocks of grain full of ripe golden ears.

"Come, ye blessed of my Father—I was sick and ye visited me."

"The objects and powers of our art are alike great and elevated. Our aim is as far as possible to alleviate human suffering and lengthen out human existence. Our ambition is to gladden as well as to prolong the course of

human life, by warding off disease as the greatest of mortal evils; and restoring health, and even at times reason itself, as the greatest of mortal blessings. . . . If we follow these, the noble objects of our profession, in a proper spirit of love and kindness to our race, the pure light of benevolence will shed around the path of our toils and labors, the brightness and beauty that will ever cheer us onward and keep our steps from being weary in well-doing."

If it be possible, as much as lieth in us live peaceable with all men; never allow the darker part of our nature to persuade us to the attempt of overtaking him who has distanced us in the race of life, by any unjust efforts to lame the character and thus diminish the speed of our adversary. May a retrospect of our lives be a retrospect of love and usefulness and honor and glory.

"Mourn the living, not the dead," said a good old soul with a heart full of love and charity, who always is striving to make others happy, "sending flowers to your friend who is gone, I send mine while living." There was so much truth in her sentiment. Are there not some who might well exclaim:

O friends, I pray to-night,
Keep not your kisses for my dead, cold brow;
The way is lonely; let me feel them now.
Think gently of me; I am travel worn;
My faltering feet are pierced with many a thorn.
Forgive, O hearts estranged, forgive, I plead!
When dreamless rest is mine, I shall not need
The tenderness for which I long to-night.

"Garlands of flowers for the noble dead. Glory to those staunch pioneers whose devotions are seeds shaken from the tree of life. From a great multitude arises a large shout, and the word of their heart is amen to the cause of relieving the sufferings of humanity."

When are summer roses sweetest?
When the sweet is shed.
When are summer skies the fairest?
When their light is fled.
Strange it is we never prize
Blooming rose nor bonny skies
'Til the summer's light is fled,
'Til the rose's sweet is shed—

When are present hours the brightest?
When their hopes are sped.
When are friendly faces dearest?
When those friends are dead.
Sad it is we never prize
Happy hours nor loving eyes
'Til the happy hours are sped—
'Til the loving eyes are dead.

SOLANUM CAR. IN EPILEPSY.

In an interesting paper in The American Medical Monthly Dr. E. James Milwain, of Jackson, Tenn., tells of the exceeding great value of solanum car. in occipital headache,

vertigo, diarrhea and a relaxation of the system generally. In epileptic seizure he mentions the following case:

A colored woman, aged twenty-four, to all appearances strong and robust; weight, 165 pounds; an ebony statue. She had suffered for years, having sometimes three or four attacks a month, while at other times less frequently, never missing an interval of more than three weeks. On each occasion she had received the usual heroic (allopathic) treatment; morphia by injection, and restraint. With the aid of several strong men she would in time recover, utterly prostrated. I was called to see her something like eighteen months ago; found her frothing at the mouth, eyes rolling, teeth gnashing, ending in complete opisthotonos. I immediately injected one-half drachm of solanum carolinense in each arm, and in the course of half an hour was enabled to give her one drachm orally; she then became quiet and relaxed. Shortly after she called for her father, but in a short time premonitory symptoms again began (stretching and jerking). She was given two more drachms, which produced copious emesis, followed by a refreshing sleep, perhaps half an hour. Then, after awaking and calling for something to eat, walked four blocks to her house and never had another attack until two months ago, when a few doses soon relieved her.

He cites two cases of spasms in children cured, and concludes his clinical report with this instance:

There is one more use to which I have put solanum car., namely: In the lying-in room a tampon saturated with the oil of solanum car. and firmly applied against the cervix will produce painless dilatation as nothing else will.

Attended the confinement of Mrs. H., aged twenty-eight; small and compact in build; nervous on account of her sister's troubles during childbirth. Labor pains first made their appearance at 5 p. m. Arrived at 10:30 p. m.; second stage of labor, slow dilation, placed tampon in position and inside of half an hour could introduce my four fingers, position L. O. P. Labor terminated in three-fourths of an hour, no lacerations of any kind. As near a painless labor as I ever saw in a primipara.

He draws the conclusion from his experience "that given in small doses, it has no therapeutic value whatever (in acute cases), but its curative properties are beautifully shown in large doses, i. e., one-half to one drachm

THE DOCTRINE OF SIGNATURES AND THE LAW OF SIMILARS.*

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While engaged in the study of the remedies comprised in the homeopathic materia medica, more especially of those belonging to the vegetable kingdom, one cannot fail to be struck with the correspondence often observable between outward peculiarities of flower or form in the drug and the organ or malady for which it has been found remedial. It would almost seem that it is to be the lot of homeopathy to rehabilitate the ancient doctrine of signatures, developed and glorified by Paracelsus, and possibly utilized by Hahnemann himself and the older homœopaths for suggestions as to the properties of drugs, the outlines of which were filled out by provings and clinical observations.

The Century Dictionary thus defines the meaning of the word "Signature" in this connection: "An external natural marking upon, or a symbolical appearance or characteristic of, a plant, mineral, or other object or substance, formerly supposed by the Paracelsians (and still by some ignorant persons) to indicate its special medicinal quality or appropriate use. The medical theory based upon this conception, known as the Doctrine of Signatures, took note of color (as yellow flowers for jaundice and the bloodstone for hemorrhage), shape (as that of the mandrake and ginseng), various peculiarities of marking, etc. Many existing names of plants, minerals, etc., originated from this theory. See kidney-wort, mandrake, scorpion-grass. Also called sign, seal, and sigil"—I have to own myself, gentlemen, one of those "ignorant persons" alluded to in the above admirable definition. As the negro preacher remarked, by way of consoling his flock for the trials of life, there is one place where you are always sure to find sympathy; and when asked, Where? he replied with emphasis, in the Dictionary! I confess it has never failed me. An unrepentant sinner, however, I am going to air my ignorance on this occasion, and even venture, it may be, to defend it.

Let me premise that there is sometimes more hidden likeness in superficial resemblances than might at the first blush be supposed. We talk about going "to the root" of a matter as if in the roots of a plant the chief

characteristics were to be found. No doubt, if we had the vision, we should observe differential characteristics in every microscopic bit of every plant, but the unmistakable features are oftener found in the blossom or fruit. So it is with disease: it is in the symptoms—the blossom of disease, exanthem,—that the sigil or signature of the malady is most in evidence; and it is Hahnemann's great glory to have demonstrated that the best drug signatures are to be discovered in the out-blossoming symptoms experienced by the drug-prover. But that does not say that drug-provings abrogate the older doctrine of signatures. On the contrary, I maintain that in many instances our provings show that there is an amount of truth in it unsuspected by the hyper-sophisticated intellect of an age that boasts of its knowingness.

Taking it on its lowest basis, an admirable mnemonic is to be found in the correspondence between physical appearance and symptoms; and if there is an art making more demands on the memory of details than homeopathy I have yet to hear of it. The case of the Eye-bright, Euphrasia, will at once occur to you all. The signature of the plant is its eye-blue flower; and how true the inference of the ancients was as to its medicinal properties homeopathic provings and uses have amply demonstrated. And I cannot suppose that this is merely a curious coincidence, of use only for the exercise of medical small-wit. There is not only such a thing as an irony of fate, which we often hear about, and sometimes experience; there is also, if I may so say, a wit and humor in the very nature of things. My contention is that we ought to investigate this and make the most of it, and not the least, as the present tendency would seem to be. Putting the matter, therefore, on the lowest grade of utility, that of a mnemonic, there is no reason why we should not use the eye-likeness of Euphrasia to stamp indelibly on our minds the chief sphere of action of the remedy. And to go back to the examples of our sympathetic dictionary—"the yellow flowers for jaundice, the bloodstone for hemorrhage"—a teacher of materia medica would find it of no little assistance to point out to his class the yellowness of Hydrastis, the "golden seal" with its "Turmeric root," the yellow flower of Calendula, the yellow juice of Chelidonium, the yellow stain of Nitric Acid, and the yellow color of Chrome of Sulphur, of Picrate of Iron (to mention only a few), as evident in medicines which power-

*Read at the Annual Homeopathic Congress, 1898.

fully affect the liver; and as for the bloodstone in hemorrhages, when we remember that it is iron which gives it the color, we cannot but admit that in this case also the signature is a true one.

Some time ago, when making a study of *Cistus Canadensis*, I was struck with one characteristic developed in the provings. The common names of *Cistus*, as you know, are "Rockrose," "Ice-plant," and "Frostweed." Hering quotes from the United States Dispensatory this description: "It grows in low, dry, mica-slate hills and serpentine rocks. It is abundant at the foot of Pine Rock, New Haven, in the barren plains, and seems to be dependent on the presence of the talc (magnesia). It is said"—and here is the point to which I wish to draw particular attention—"that in the months of November and December these plants send out near the roots broad, thin, curved ice-crystals, about an inch in breadth, which wilt in the day and are renewed in the morning."

Now, you may ask, what possible connection can there be between the physical appearances or peculiarities of a plant and the effect on the human organism of the same plant after it has been macerated with alcohol or boiled down into a decoction? That I cannot answer; all I can say is that in the provings of *Cistus* a sensation of coldness is one of the commonest symptoms met with. Here, for example is a selection:—"Forehead cold, and sensation of coolness inside forehead, in a very warm room; cold feeling in nose; sensation of example, is a selection: "Forehead cold, and coldness of tongue, larynx, and trachea; saliva is cool; breath feels cold; empty and cool eructations; cool feeling in stomach before and after eating; cold feeling in whole abdomen."—It may be said that sensations of coldness are common to scores of medicines, and that is true. But coldness of the tongue, of the saliva, and of the breath are not common symptoms; and I cannot help feeling that there is some occult connection between the electric properties of the plant which favor the production of ice about it, and the chilling effect of the drug on the body when taken. At any rate, I put down in my private materia medica "unusual sensations of coldness" as a keynote for the use of *Cistus*; and curiously enough, I did not have long to wait before an opportunity arose for testing it. A patient came to me about that time complaining of coldness of the whole left side

of the body, and she feared that paralysis was coming on. I prescribed *Cistus*, and there was soon an end to the one-sided coldness, and the fear of paralysis along with it.

The rule "Let likes be treated by likes," as we generally understand it, refers to the likeness between drug effects and disease effects on the symptom plane. But I do not see why we should not extend the meaning of the rule and include within the sphere of the correspondence plant or drug-appearances and organ, or disease-appearances. If we take this view of it, the doctrine of signatures may fairly be brought within the four walls of the homeopathic formula.

Before proceeding further I should like to make it clear that I do not claim for all drugs the possession of signatures. They may all have them, but we have not yet learned to read the signs. Nor do I contend that the signs, when found, are of superior value to provings or to clinical observations. What I do maintain is that in them we may find pointers of great value. They may be used either to supplement provings, or to confirm them; and to suggest uses when provings do not exist.

Take, for example, the "Shepherd's Purse" (*Thlaspi bursa pastoris*). So far as I know there does not exist any proving of this plant, but it is recognized by almost all homeopaths as an uterine remedy of the very first rank. How was this discovered? I ask any one to look well at the seed-vessel of this common weed and see if they cannot discern a signature of the most obvious kind in its shape; the very counterfeit of a virgin uterus. Take, again, a remedy which has recently been used by homeopaths who have adopted it from the eclectics—*Echinacea Angustifolia*. It possesses a root which turns black on exposure, whence its name, "Black samson," is drawn. The keynote for its employment is given as "black tongue." It is used in diphtheria and low typhoid conditions, with or without this symptom, but it is most specially indicated in cases where a black tongue exists. Dr. Burnett has recorded excellent results from *Fragaria vesca* in conditions where the strawberry tongue is a prominent feature. *Elatarium*, the Squirting Cucumber, has a signature impossible to mistake. I have never had an opportunity of witnessing the bursting of the seed-vessel, but I am told by those who have that the report is most strikingly suggestive. The bulb of squill exudes a juice that is the very counterpart of mucus, and this in all

probability first suggested its use as an expectorant.

The signatures are by no means confined to outward appearances. Habitat has frequently suggested the medicinal properties of plants. It is a common idea that every country or district produces the remedy for the particular kind of illness that may be most prevalent in it. The subject has never been thoroughly worked out, but instances of it are not difficult to find. I may mention the hog-bean, *Mentha*, a notable ague remedy, which, as belonging to a fern county, I heard about when I was a boy. The anti-rheumatic properties of *Salicin* may be typified in the damp places in which the willow grows; and I believe Dr. Cooper got his idea of *Lemna minor* (a valuable remedy in catarrh, as I can attest) from its flourishing in ponds. "Aggravation from damp" is the leading indication for its use.

But I need not weary you with more examples, plenty of which will no doubt occur to you all. My aim is rather to open up the subject and set the minds of my hearers working in this direction. It is well for us to know our medical materials in an all-round way, and not merely as something in a bottle with a label on it, and a list of symptoms in a book.

Before concluding I wish to enter a plea for a wider range in seeking indications for the employment of drugs. I don't think my worst enemy—if I have the honor to possess one—will accuse me of ever having manifested symptoms of being a wobbler in the faith. I have sought to practice it to the extent of my knowledge and ability, fully alive to the fact that homeopathy is much too big to be completely mastered by any one man in a lifetime. On the other hand, I am not aware that my membership of the homeopathic confraternity ties me down to prescribe only on symptoms that have actually been produced in provings on the healthy. That provings are the most fertile source of trustworthy indications I fully believe; but I do not think when Hahnemann penned his "Essay on a New Principle for Discovering the Curative Powers of Drugs," he had any idea that the curative powers discovered in other ways were to be discarded; and if he did mean that, I should say he had made a mistake. Provings are the foundation and superstructure of our art, but there are many other elements that can usefully be employed in the complete equipment of the edifice, and among them the ancient doctrine of signatures should occupy, as I contend, a place of no small importance.

Materia Medica Miscellany.

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References in this department are made by number. See issue of January 1, or December 15, of each year.

Yerba santa in Influenza.

During the year 1896 my son and I, at that time residing in California, decided to go on a hunting and fishing excursion up into the Sierra Madre range of mountains, a guide—an Englishman, who provided us with mules and burros to convey ourselves and baggage to our destination—accompanying us. On our way up the trail the guide pointed out to us many plants and shrubs, amongst others *yerba santa* (herb of the saints, as he named it), saying that it was the best thing he knew for any catarrhal affection, especially for a cough, and speaking highly of its beneficial effects on himself. He also told us that the Mexicans, or "greasers," as they are generally named, used it constantly for the above-mentioned purpose and considered that there was nothing equal to it. Shortly after my return home to Los Angeles from this expedition I was summoned to attend two young Englishmen who were suffering from smart attacks of influenza. After the febrile stage had subsided both of them were affected with the very troublesome cough which so often supervenes at this stage of the attack. Bearing in mind what I had heard about *yerba santa* when up in the mountains I decided to give it a trial; so I prescribed it for these patients, with the result that in both cases the cough was speedily relieved and soon cured.

Poisoning by Chloroform.

A robust housemaid, age 19, finding herself three months pregnant, took with her to her bedroom on a Friday night in November last a bottle of chloroform and swallowed 3 fluid ounces of the liquid, most probably between 3 and 4 a. m. on the Saturday morning. At 6:30 a. m. her mistress found her lying with her head over the side of the bed, her cheek resting on the floor. She was snoring loudly, and was quite unconscious. When seen at 8:30 a. m. she was in bed perfectly unconscious, with complete muscular relaxation, flushed face, and widely dilated pupils; the corneæ were insensitve. The pulse was reg-

ular and full. Her mouth and breath smelt strongly of chloroform.

The stomach pump was applied with little result; the fluid which returned did not smell much of chloroform. Strychnine gr. $\frac{1}{20}$ was injected hypodermically, and the dose repeated two or three times during the day. Enemata were given to unload the bowels, so as if possible to get rid of some of the poison; they were not relieved, however, till about 3 p. m. Enemata of strong coffee and of brandy were also given. The mouth gag was used, and the tongue kept well forward all the day. The breathing kept good and the pulse natural. At 4 p. m. consciousness returned after an absence of twelve hours. In the evening she was removed to her home in a cab, and her sister states that she made an excellent recovery from the chloroform.

Poisoning by Stramonium.

On January 9th at noon Mrs. H., aged 53, took a teaspoonful of an antiasthmatical powder in mistake for licorice powder. At 12.45 p. m., when sitting down to dinner, she could not understand a dry feeling in her mouth, which sipping water did not affect in the least; at the same time her sight became blurred, and she experienced a peculiar sensation of swelling in her eyes; lifting the glass to moisten her lips she exclaimed at the weight of it, and feeling herself getting worse she told her husband to go for the doctor, and from this time remembered nothing till about 6 or 7 p. m. When I saw her at 2 p. m. her condition bore a remarkable resemblance to a case of delirium tremens; her face, however, which was markedly pale, was not expressive of suspicion or anxiety, nor was there any clammy perspiration, the skin being perfectly dry. Her eyes were bright and staring, the pupils dilated, but not excessively, and absolutely insensible to light. The flow of ideas was very rapid, and her speech so fast that only at times could any sense be made of what she said. Mirthful deliriums and hallucinations were very prominent, but illusions and delusions were markedly absent. Although she often attempted to rise she seemed unable to do so from inco-ordination of the lower extremities. Sensation, however, was perfect. The power of swallowing at first seemed absent, but if she was prevented from returning what was placed in her mouth she swallowed it. Breathing was quiet, but the pulse was very rapid, thready and compressible. After using the stomach pump freely

nitrite of amyl and digitalin (hypodermic) was administered, and shortly afterward pilocarpin ($\frac{1}{3}$ gr.). Recovery after the use of the latter was remarkably rapid.



RABIES.

1.—It is supposed that a mad dog dreads water. It is not so. The mad dog is very likely to plunge his head to the eyes in water, though he cannot swallow it and laps it with difficulty.

2.—It is supposed that a mad dog runs about with evidences of intense excitement. It is not so. The mad dog never runs about in agitation; he never gallops; he is always alone, usually in a strange place, where he jogs along slowly. If he is approached by dog or man, he shows no sign or excitement, but when the dog or man is near enough, he snaps and resumes his solitary trot.

3.—If a dog barks, yelps, whines or growls, that dog is not mad. The only sound a mad dog is ever known to emit is a hoarse howl, and that but seldom. Even blows will not extort an outcry from a mad dog. Therefore, if any dog, under any circumstances, utters any other sound than that of a hoarse howl, that dog is not mad.

4.—It is supposed that the mad dog froths at the mouth. It is not so. If a dog's jaws are covered or flecked with white froth, that dog is not mad. The surest of all signs that a dog is mad is a thick and ropy brown mucus clinging to his lips, which he often tries vainly to tear away with his paws or to wash away with water.

5.—If your own dog is bitten by any other dog, watch him carefully. If he is infected by rabies, you will discover signs of it possibly in from six to ten days. Then he will be restless, often getting up only to lie down again, changing his position impatiently, turning from side to side, and constantly licking or scratching some particular part of his head, limbs, or body. He will be irritable and inclined to dash at other animals, and he will sometimes snap at objects which he imagines to be near him. He will be excessively thirsty, lapping water eagerly and often. Then there will be glandular swelling about his jaws and throat, and he will vainly endeavor to rid himself of thick, ropy, mucous discharge from his mouth and throat. If he can, he will probably stray away from home and trot slowly and mournfully along the highway or across the country, meddling with neither man nor beast.

unless they approach him, and then giving a single snap. The only exception to this behavior occurs in ferocious dogs which, during the earlier stage of excitement, may attack any living object in sight.

SOME PNEUMONIA DON'T'S.

THOMAS J. MAYS, M.D., Philadelphia

Don't believe that acute pneumonia is a self-limited disease and will get along as well without treatment as with it.

Don't hug the delusion that fever in any degree is a benefit to the patient.

Don't fancy that you can always tell croupous from catarrhal pneumonia.

Don't allow pain in the abdomen to draw your attention away from the chest. Frequently the beginning of pneumonia is accompanied by severe pain in the right groin, which may lead one to suspect the onset of typhoid fever.

Don't direct your treatment more toward the heart than toward the lungs.

Don't fail to recognize the great influence of the brain and nervous system.

Don't lose sight of the serious indication of rapid and laborious breathing.

Don't be afraid of applying ice to the chest in rubber bags. It will do no harm.

Don't fail to apply as many bags as are necessary to cover the area of inflammation.

Don't think that you can get as good results from a tub-bath, or from cold general spongings, as you can from the local application of ice.

Don't become alarmed when the ice produces a sudden drop in the temperature, and think the patient is going into collapse.

Don't fail to retain the ice so long as fever is present, and resolution has not taken place.

Don't overlook the beneficial influence of strichnine in combating pneumonia. Administer $\frac{1}{20}$ of a grain by the mouth every

three or four hours, and besides give the same dose hypodermically once or twice a day, until the system becomes irritable.

Don't omit to apply one or two ice bags to the head.

Don't fail to administer oxygen by inhalation more or less constantly if the patient is cyanotic or short of breath.

Don't omit the hypodermic injection of $\frac{1}{4}$ of a grain of morphine once or twice a day to secure rest and sleep.

Don't lose sight of the great value of tincture of capsicum in relieving great nervous depression, delirium, dry, black-coated tongue, picking at the bedclothes, etc. Give it from a half to one teaspoonful doses in water every two or three hours, or oftener, in alcoholic pneumonia.

Don't fail to give sodium salicylate, ammonium acetate, potassium acetate, and potassium citrate, three grains of each, in a dessert-spoonful of peppermint water, every three or four hours, if there is the least evidence of a rheumatic complication.

Don't overlook the important action of quinine in this disease.

Don't fail to support the patient with an abundance of nourishing food, such as milk, freshly expressed beef-juice, etc.

Sold His After-Birth.

A medical student was recently asked to take a Sunday-school class, which, after some protest, he consented to do. He got on very well over the questioning, but when it came to parting out knowledge he began to get a little rocky. He managed Abraham, Isaac, and Jacob very well, but when he explained to the gaping kids that Esau was a man who sold his after-birth for a bottle of potash, the vicar hinted to him in no measured terms that it was time he went home and had his tea.

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The American Homeopathist.

NEW YORK, AUGUST 15, 1898.

FRANK KRAFT, M.D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



HENRY E. SPALDING, M.D.,
Boston, Mass.

Where, oh, where, are the April and July issues of the Journal of Homeopathic Surgery?

When the blatta orientalis leave the house en masse and voluntarily, so runs the saying in Russia, some dire misfortune will happen to that house—usually, fire. Shall this be added to the homeopathic (?) symptomatology of this asthma-curing remedy?

We learn now that Mr. Anshutz of the Philadelphia B. & T. firm and editor of the Homeopathic Recorder was at Omaha. Presumably he spent most of his time in the lobbies and exhibit rooms. Sorry to have missed him.

The only reference to the army and navy in relation to the appointment of homeopaths at Omaha was proposed by Dr. Fisher, and when it was returned without recommendation by the Committee on Resolutions, was savagely laid on the table. Why?

Anshutz, of the Hom. Recorder, doesn't think Schuykill water the proper medium in which to drink Medical Visitor Smith's health.

If we could but have a part of the heat of Omaha at Atlantic City next year we might not have so much to say about it, when we could dip in old ocean.

We cannot quite agree with our brother of the Medical Century when he affirms that the hotel accommodations at Omaha were most vile. We know that those of us who went to the New Murray had no complaint to make. THE AMERICAN HOMEOPATHIST usually selects and recommends a good hotel.

THE WEIGHT OF HOMEOPATHY.

A woman-homeopath, treating a case of rheumatism, answered an inquiring friend of the patient that she was only going to try a few days more, then, if not successful, she would let the patient go to some springs. What medicine? Shows the prescription and the row of bottles and ointments on a mantel-shelf. "Why," said the friend, "I thought you are a homeopath!" "I am, but homeo-

petio medicine is not **HEAVY** enough for a case of this kind!

In other words, if Cervera's fleet had only used heavier projectiles it would undoubtedly have carried the day. The aim had naught to do with the case!

And this is homeopathy, as applied by young men and women only a half dozen years graduated. This woman doctor never knew what homeopathy was. She had the prevalent idea of the average young man or woman at school that it is simply old school medicine with more or less water added to it, according to the sensibility of the patient. Is it not about time to talk of revising the materia medica again? Perhaps if a thorough revision was made of Hahnemann's materia medica and the symptoms brought strictly up to date, this woman doctor would be able to find a remedy **HEAVY** enough in Homeopathy to cure her patient.



INSTITUTE GYNECOLOGY.

One of the most remarkable surprises of the Institute sessions at Omaha consisted in the fact that Chairman Leavitt was able to hold his Gynecological Section all in one evening, instead of several evenings or sessions as in former times. This is evidence of one of two things: either that the interest in the section is dying out, or else that Chairman Leavitt is a wonderfully clever handler of the gavel. On second thought, we believe both postulates are correct. All Institute members who know Professor Leavitt know him to be a fine presiding officer, and that no extraneous matter is ever suffered to creep into the discussions in any section over which he presides. But it is, nevertheless, also, a notable fact that the interest in gynecology is waning. So long as only a few eminent men like Wood and Ludlam and Lee and Green and Packard and Talbot and Ward and Walton and Kinyon and others were able to do the operations it was a novelty and a source of goose-fleshy inspiration and instruction to sit by and listen to the bloody engagements as did Desdemona to Othello. We were carried away by the dash and daring of these intrepid operators; we flocked to hear them recite their marvelous successes, and examined the gruesome dinner-plate full of assorted sizes of wombs and ovaries. But now, since every man turned out from a homeopathic college—indeed from the youngest entered apprentice in the northeast up to the full fledged and raised-up master—is capable

of performing all these varied operations, the novelty is palling; the sense of curiosity crowns the sense of satiety, and we are asking for something else. It looks very much as if the knell of modern operations is sounding. It has had its day and a long day. Many a man and woman has lined his pocket while the new idea tickled the novelty-seeking profession and public. Much good was done in the beginning; but the introduction of incompetent operators, and the cutting of the fees, has spoiled the work. It has had its rise, its zenith, and little by little it will descend and find its place once more with every-day, placid surgery. Women are not so easily frightened into having an operation done now-a-days as they were several years ago. For it not infrequently happens that a long memory recalls that this and that and the other woman went to the hospital and—never came back. Besides, a new form of gynecology is coming to the front—that referred to by Beebe at Columbus—the non-cutting kind. Heaven speed that day. And leave us our homeopathic gynecologists just the same, but cut off the output of new material each year.



THE BRITISH HOMEOPATHIC DINNER.

Dr. Clarke, the brilliant editor of the London Homeopathic World, has for a leader in his July issue "The Progress of Homeopathy," in which he rattles some of the dried bones with a firm and deliberate hand. He criticises the attendance at the British Homeopathic Congress banquet of lay ladies, because in their presence no one would think of talking shop—which ought to be the purpose of the Congress from its beginning to the end of the banquet. He doesn't like the musical feature in that it diverts from the possibilities of the medical occasion and turns the banquet into a mere society function. The speeches, it seems, were made by two members whose names are not to be found in the Homeopathic Directory. He speaks in highest terms of praise of the impromptu remarks of Dr. Goldsmith, of Cincinnati, who recounted some of the means adopted by his countrymen in securing for themselves needed legislation and recognition. The editor believes that the fault of this dinner, as is the fault of the society, rests in the utter indifference and lack of cohesion of the individual members. Hence the British homeopaths are less in number by one-third than they were a dozen

years ago. And hence, too, the British Homeopathic Congress threatens to degenerate into an annual namby pamby social affair—a swell dinner, with ladies, music and set speeches, with Homeopathy used only on the menu card. The arraignment is sharp and severe.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Arsenicum in Cancer of Rectum.

Dr. Frank Wieland reports the following case, the diagnosis of which was made by competent allopathic authority:

The first was that of Mr. W., a tall, muscular man, forty-eight years of age. About fifteen years ago, while overheated, he drank a quantity of ice water, which occasioned a diarrhea, that in all these years had troubled him incessantly, and had resisted all treatment.

About three years ago the stools became slimy and mixed with blood; finally all control of the sphincter ani was lost.

In February, 1897, he went to the Mercy hospital of this city, where a superficial examination resulted in a diagnosis of internal piles. The pain and stools continuing, he was anesthetized and examined more carefully, with the result that a carcinoma of the rectum was discovered. It was so extensive that operative measures were deemed inadvisable and he was discharged as an incurable. He then came under my care. The lesion, however, was so extensive that it seemed folly to operate, despite the wishes of the patient and his family. He then went to the County hospital and was denied an operation there.

Meantime, I had given the case some study and had put him under medical treatment. The symptoms plainly called for *Ars.*, and he was given the remedy in the 1 m potency.

The improvement was almost immediate. The stools decreased in number and became more consistent. After two months of treatment he was able for the first time in fifteen years to sleep all night with no bowel movement. He has now been under treatment for about three months. A month ago the character of the stools changed. He described

them as being long and hard and floating in a quantity of colorless water.

I gave him phosphorus 1 m.

He then left the city to work on his farm, and in a recent report to me he was working every day after a lay-off of two years; was sleeping all night; was passing only two stools a day and these were formed. I do not say the carcinoma is cured, but the patient is so much relieved in every way that we feel that we have no quarrel with it.—Med. Adv.

Senega for Sneezing.

This case, by Dr. Clinton Enos¹², emphasizes a neglected remedy:

The patient, a very short and a very fat girl of ten years with cold, damp feet and hands and sweaty about the head, has had spells of sneezing for the past two years—ever since she had whooping cough. She would have several spells of sneezing every day that would last for half an hour or so. She had sharp pains in chest and temples during these attacks. There was also a large quantity of mucus in nose, with a stuffed-up feeling. When she would have these spells at school she annoyed the pupils so that the teacher would send her out into the hall till she got over them. On Nov. 23, 1896, when on a visit at her home, I was asked by her mother to prescribe for the sneezing. I did so, but it did not do any good. I studied the case more carefully. I could not get hold of symptoms as I did in the other case, so I took my Lippe and run down dozens of remedies till I found that senega was the remedy. I gave her one dose of the 200th, Dec. 2, 1896, and in a week the sneezing was all gone and she has not had any more of it to this day, although she had measles three months after that and has had two or three bad colds since. The stuffing up of the nose has disappeared.

Arsenical Poisoning.

Louise R., age five years, an exceptionally healthy blonde girl, and very large for one of her age, swallowed a teaspoonful of Fowler's solution of arsenic, by mistake, at 11 a. m. About twenty minutes after the accident she was freely vomited by the administration of warm salt water, and large quantities of fresh cream were given her throughout the afternoon and night. At 1 p. m. I found the patient lying limp in her mother's lap, with a tempera-

ture of 97°, pulse 155, small and intermittent; respiration 40; lips dry and cracked; tongue small, red and pointed; great thirst for large quantities of cold water, which would be vomited immediately after being taken into the stomach; the skin deathly pale, and covered with a warm perspiration, which was most profuse about the head and chest. Although the drowsiness and muscular weakness were marked, the patient was very restless, insisting upon being continually turned and changed in bed, and taken from place to place about the room. Between 2 and 3 o'clock the bowels moved three different times, the discharges being of pappy consistency, yellow, frothy, excoriating and offensive. The stool was small, preceded by intestinal pain, and followed by prolonged tenesmus and exhaustion. By 4 o'clock the child was fairly comfortable. During the night she was continually thirsty, and complained of pain in the stomach, but was able to sit up in bed the next day, and, ultimately, made a perfect recovery, although she was conspicuously chlorotic for many months.—Dr. E. J. Burch⁴.



Coca in Neurasthenia.

Dr. E. S. Chapman²¹ urges the use of coca, particularly upon the following indications, which he has conclusively verified:

1. Irritability, despondency, and inability to fix the mind upon any subject for any considerable time.
2. Timidity and dread of appearing before society or audiences, even with those who have been accustomed to do so for years.
3. Extreme bodily weakness and lassitude, necessitating the patient to occupy the recumbent decubitus many hours daily.

One interesting verification Dr. Chapman reports thus:

I was consulted by a gentleman who had for many years been before the public as a speaker and a writer. During the late presidential campaign he had stumped his state, making political speeches six nights in the week for two or three months, and after the election he went into a state of mental and bodily collapse. I put him on kili phos., phosphorus, zincum phos., etc., as I thought them indicated, but with no perceptible benefit. The case was about to pass from my hands when he mentioned a symptom that led me to the selection of the indicated drug. It was this: He felt a timidity when in company or before an audience that was entirely foreign to his nature,

and which he could by no means overcome. Added to this were extreme irritability and hypochondriasis, lack of will power, so that he could not fix his mind upon any subject for more than a few moments at a time. Great weakness of the body and lassitude, causing him to spend most of his waking hours in the recumbent posture. All this was the exact opposite of his usual custom, his normal condition being that of the greatest activity of body and mind.

As I said before, I saw coca so plainly indicated by the above symptoms that I put him on one dose of the c. m. potency, and nothing was left to be desired. His restoration to health was immediate, and in a few days he was about his usual labors.



Calcium Chloride for Hemophilla.

An extract published in this column last year described the action of this drug, but only casually hinted at the warning with which the following item closes. It emphasizes the unsatisfactory character of physiological treatment, with its certain limit, the reaction.

The treatment by calcium chloride, which is based on physiological findings, seeks neither to close the rent in the vessels nor to reduce the blood pressure, but to heighten the coagulability of the blood generally, and so to favor thrombosis at the bleeding points. The salt must be given in full doses of from 15 to 45 grn. every four to six hours, or in great emergencies from 20 to 30 grn. as an initial dose, and then from 4 to 5 grn. every quarter of an hour for a few doses, subsequently as above. Investigations seem to indicate that the coagulability of the blood increases during the administration of calcium chloride up to a certain point, and then declines and may fall even below the normal. For three or four days the coagulability increases, and therefore, during a period not exceeding this, the drug may be given, dissolved in either water or milk, or with the addition of some extract of licorice.²²



Ammonium carb. in Acute Coryza.

To cure an "acute cold" promptly is certainly very gratifying to both patient and physician. The following case illustrates the prompt action of ammonium carb:

J. H., aged fifty-four, came for relief of the following symptoms: Morning—Eyes burning, with great redness of lids as though from

weeping, profuse lachrymation. The nose was stuffed, although there was a profuse watery, acrid secretion, with tickling in left nostril, causing sneezing and a constant desire to blow. At times some bloody mucus was discharged. A feeling of pressure in the left lung and some soreness which is worse when coughing, and also during night and when lying down. The limbs ache and he feels weak all over. Ammonium carb. 3, for twenty-four hours, and then sac. lac. At end of forty-eight hours he said that he was well.—Geo. P. Hale, M.D.³



Sulphate of Duboisine in Paralysis Agitans.

Professor Xavier Francotte has used the sulphate of duboisine (on Mendel's recommendation) in four cases of paralysis agitans, with satisfactory results. The drug has a real influence on the tremor, but only temporarily since the action lasts only three or four days; the influence on the muscular rigidity is less and on the weakness and pains is nil. No annoying symptoms were caused by the drug except in one case where the dosage in one day amounted to 4 mgr. F. prescribes it in the form of granules each containing one-half a milligram, three to six granules being given in the course of the day.



Benzoic acid for Enuresis.

Dr. S. C. Scholes (Med. Adv.) tells how his own little boy was troubled with difficult urination from birth. Circumcision was strongly advised by the attending physician, but not resorted to. However, the urethral canal was dilated, apparently relieving the trouble. A few months later I noticed the urine was scanty, only a tablespoonful or two being passed at a time, cream-like in consistency, and of a milky color. About this time, too, eczema appeared, almost covering the lower limbs. He had homeopathic treatment; would improve somewhat and then get worse—this state of affairs continuing for about three years. The eczema was finally dried up with cuticura and tar soaps and some lotion prescribed by the doctor when this incontinency of urine appeared. Urine was very profuse, offensive, of a sweetish odor, involuntary only in the day time, not during sleep. He grew worse and worse for a year. His clothing had to be changed several times a day and a daily clothes' washing take place. Clothes were starchy and whitish where urine touched them. As the little fellow was a neat and careful

child, it was very mortifying to him, especially as he was blamed for it; but the desire to urinate was sudden and irresistible. Having tried a number of remedies without effect, I consulted one of my classmates and he, noticing the disagreeable odor, suggested Benzoic acid. I gave him a few doses of it and a perfect cure resulted. He is now eight years old and has had no return of the trouble. The eruption, however, reappeared, this time on the breast and arms, but nothing was ever used again to dry it up. Some months after the use of Benzoic acid Dr. H. C. Allen retracted the prepuce, broke up adhesions around the glans and gave him a dose of Psorinum. The boy is now a well developed child mentally and physically, and has been well and happy for three years.



Barrium chloride in Heart Disease.

This drug, which homeopathic provings and clinical observations show to be of value in heart disease and aneurism, is yet so far neglected that the following statement of its properties from an old school source will be interesting:

Barium chloride (Therap. Gaz., XXII, p. 236) in small quantities possesses a physiological action closely allied to that of digitalis so far as its influence upon the heart is concerned. Thus it slows the heart very greatly, steadies cardiac rhythm, and markedly increases the quantity of blood thrown out of the ventricle at each contraction. At the same time it increases blood-pressure, as has been proved by the careful studies of Kobert, of Dorpat, and it would seem probable that it exercises a more powerful systolic influence over the ventricles than does digitalis, the slowing of the pulse being due rather to an excessive systolic action of the drug and to high arterial tension than to any effect which the drug may exercise upon the pneumogastric nerve. The drug is therefore one which apparently should prove useful in a certain proportion of cardiac diseases, which for one reason or another fail to obtain benefit from digitalis.

A large number of clinicians have employed this drug in the treatment of heart disease with failing compensation, both in adults and children, particularly when the pulse is weak and irregular, and is lacking in volume. The writer has used this drug in a number of cases and has reached the conclusion that it is of value, but must take place after both digitalis and strophanthus as a cardiac tonic. The dose is a teaspoonful of the 1-per-cent solution

three times a day to an adult or one-half this to a child from six to ten years. These doses do not cause irritation of the gastro-intestinal tract, and very much larger doses of barium are required before it will act as an irritant poison. There are, therefore, no reasons why it should not be tried in the cases mentioned.

Garrine.

Garrine is an alkaloid discovered by Armentariz⁷ in the bitter bark of *Garrya racemosa* Ramirez, a Mexican corneaceous plant. It is crystallizable, is odorless, very bitter, and readily soluble in water and in alcohol. Nitric acid colors it pink. It possesses the property of increasing the number and depth of the respiratory movements; an intravenous injection of the decoction of the bark may cause death by paralyzing the respiratory centers. The drug acts also on the digestive tract as a bitter tonic. It has been employed in atonic diarrhea, in the form of tincture, teaspoonful doses being given thrice daily. It is best exhibited, however, in the form of its hydro-alcoholic extract in pills containing 0.1 gme. ($1\frac{1}{2}$ grn.) each.

Lachesis in Endocarditis.

Dr. C. E. Colwell⁸ tells how in February, 1892, L. F., aged five years, was, by a disobedience of orders, permitted to acquire an acute endocarditis and rheumatism of several joints by exposure after scarlet fever:

"He grew rapidly worse, in spite of all that was done for him, until it seemed that he would surely die. Though feverish his skin had a peculiar yellowish pallor; the cachectic color that we see occasionally following scarlet fever or diphtheria, and a few other diseases that deeply affect the blood.

"Almost from the first of his rheumatic attack, all of his symptoms had been worse upon awakening. He would waken with a whine or a cry, as though in pain. Nothing for a time would quiet him. It did not seem to be pain from lying in one position too long, which could be relieved by moving (the *rhus*. symptom), for moving him did not help matters. For a week he continued to grow worse, and to show more prominently the lachesis indication of 'all symptoms worse after sleep.' In addition there was the history of the blood poisoning scarlet fever, a few weeks before, and the peculiar cachexia, also pointing to lachesis.

"Though the 'writing on the wall' had been plainly 'lachesis,' as I had not used the remedy and as our potency was a high one, I could not at first get my courage to the point to risk it, so I used various remedies that had been oftener indicated, and therefore oftener used in my rheumatic cases, such as arsenicum, bryonia, colchicum, *rhus tox.*, etc.

"When a week had passed and my hopes were at low ebb, I reached the point of using lachesis. I felt its results could be no less satisfactory than from the remedies he had had. I sent thirty grains of the 8x trituration of lachesis, to be dissolved in a glass half full of water, a teaspoonful to be given every half hour.

"The next morning the uncle, his nurse, said, 'that was a wonderful medicine, for he began to improve after having taken it for two hours.' The twelve hours since I had seen him had made quite a perceptible improvement of many of his symptoms. After that he steadily gained so that three weeks afterward I discharged him. He was left with a slight mitral murmur, which he will always have. There is no insufficiency."

Hyoscyamus in Insomnia.

The following remarkable abstract appears in *Neurological Centralblatt*, 7, 1897:²⁰

Giusquiamo contro l'insonnia, per Silvio Venturi (*Archivio di Psichatria*, xvii. Fase.3). —With henbane, in homeopathic exhibition, V. has obtained excellent results in his asylum in cases of sleeplessness (simple, not complicated with maniacal excitement) and he recommends it most warmly without avowing himself a homeopath. The sleep thereby produced is a natural, not a toxic one. To the fact that he uses the remedy in homeopathic form he ascribes the lowered mortality in the asylum, it having decreased to a minimum of three per cent, while surely the customary excessive dosing with toxic hypnotics leads to the mental and bodily ruin of patients. He prescribes of the "Globuli Hyoscyami homeopathici (30th dilution)," two in the morning and two in the evening; the results are seen generally on the third or fourth day; from time to time the remedy must be omitted to avoid becoming accustomed to it.

There is a good opening in Buffalo, N. Y., for a physician of experience wishing a city practice; for information, address Dr. P. A. McCrea, 206 D. S. Morgan Building.

AN ODD QUESTION.

The Homeopathic Recorder for July 15th, has a long translation of an article by Dr. Derlin under the title of "Is Aconite A Remedy in Fever?" Why bless your ignorant soul, we can give you the names of lots of homeopaths who are willing to swear that you can't begin any kind of fever without aconite. What a foolish question to ask, "Is Aconite A Remedy in Fever?" Why, we know a good homeopathic teacher who would no more think of touching pneumonia without a preliminary dose or two of aconite than you would think of doing a laparotomy when you weren't quite sure whether it was ovarian or only an old-fashioned cucumber colic. "Is Aconite A Remedy in Fever?" Why, of course it is! Stupid. Have you forgotten that arterial sto-r-r-m of Dunham's? Have you forgotten that aconite is the homeopaths lance, and that the lance is used, either allopathically or homeopathically, when there is fever, i. e., too much blood?

**CRANCRUM ORIS.**

DAVID M. GIBSON, M.D.
St. Louis, Mo.

This disease, often called also stomatitis gangrenosa, is fortunately rare—so rare, indeed, that many practitioners do not encounter even a single case. It usually attacks children of weakened constitution, the result of some febrile disease, and is especially prone to follow severe attacks of measles.

Constitutional vice seems to have little or no influence in this terrible disease, but the loss of nutrition, either from exhaustive febrile disease or insufficient oxygenation of the blood, renders the patient more liable to an attack, hence we see it following croup.

Its course may be rapid or slow and is much like that of gangrene in any part of the body, the lesion appears as a round dark spot with or without stuffing, on the lower or upper lip, in or near the angle of the mouth; the patient complains of no pain, has no desire to eat, and but little rise in temperature, but the cadaverous odor is always present and one of the chief diagnostic features; this odor once experienced is never mistaken for anything else. In the rapid form, perforation of the cheek has taken place in twenty hours; for be it observed, the small innocent-looking dark spot has roots or tendrils running back into the solid tissue, and these in turn become new focii for the disease.

In treating this malady it must be borne in mind that the patient's tissue offers it but little resistance, and hence vigorous measures must be adopted. Excision in some manner must be performed and the curette is to my mind the best instrument for this purpose; a well marked line of demarkation never forms during the course of this disease, and the sound tissue must be invaded in order that no disease focus be left.

The patient is anesthetized and the diseased tissue carefully removed; so long as the white tough tendril can be recognized the tissue containing it must be scraped away, even though the bone be exposed in so doing; this done the raw surface is thoroughly cauterized with c. p. nitric acid, and the wound loosely filled with iodoform or sterile gauze.

Internally mere. cor., so often recommended, does but little good, and the same may be said of most remedies, but arsenicum and belladonna, either single or in alternation, exert a powerful influence for good, either before or after cauterization, though often fail, and a fatal result is in many cases unavoidable.

In my own practice I have seen but four cases, with two deaths—three of these cases following measles and one an attack of membranous croup. A report of one fatal and one non-fatal case may not be out of order.

CASE 1.—A. B., aged four years, with family history negative, but personal history good, suffered from an attack of measles, and was very sick; never was sick before, but progressed favorably, and in eleven days was convalescent from the attack, except for a sore mouth, which seemed to eat into the gum. In forty-eight hours a dark spot appeared to right of center of lower lip, with thickening of remainder of lip on that side; curettment, cauterization, medication and stimulation proved of no avail, and he died two days later. During this time the right lateral half of the jaw was exposed from the ravages of the disease, and the gangrenous line extended across the nose and up to within an inch of the orbit.

CASE 2.—C. D., aged twenty-two months, suffered from membranous croup following an attack of measles, but appeared easy at the end of ninety-six hours; six hours later examination revealed a fetid gangrenous odor from the mouth, a slight swelling of lower lip, with a small dark sunken spot on the inner side, near the angle of the mouth.

Vigorous measures were proposed and adopted, the child was anesthetized, the dark spot curetted back into the cheek, where was

found extensive lesions from the disease, the root-like branches extending back into the solid flesh for as much as one and one-half inches; these also were sought out until every particle of necrotic tissue was removed. The wound was now washed with a one per cent solution of carbolic acid, and then thoroughly cauterized with fuming nitric acid. The work was done rapidly and the child suffered but little from shock. *Ars.* 6x. and *bell.* 6x. were next administered every hour alternately, and dilute hydrogen peroxide.

As soon as permissible, beef broth, beef tea, rice soup and milk were administered frequently and in such quantities as could be borne by the patient.

The wound healed by granulation, and although four of the teeth were extracted, the child made a good recovery, and the deformity, although noticeable, is not marked.

The cheek was not perforated.



SHOULD THE INCURABLY SICK BE HELPED TO A SPEEDY DEATH.

Shall the life and the suffering of people afflicted with incurable disease and doomed beyond all hope be prolonged by the resources of science? Or shall the resources of science, instead of being applied to the prolongation of their agony, be applied to making their death as painless as possible? These questions are discussed by Percival Pickering (Humanitarian, April), and he not only cries out against the modern custom of fighting off death to the last, but suggests methods by which it may be hastened. The standpoint from which he views the subject is indicated in the following sentence:

"Those very discoveries of science which, wielded with common sense, are a boon to humanity, misapplied, may be calculated to become as great a terror; and while by their means the art of living is being simplified, that of dying is being rendered needlessly hideous and complicated."

To bring us still more impressively before the problem, Mr. Percival gives us several cases in point out of his own experience. One of them is as follows:

"A friend of mine was dying from cancer of the face. Life had not been very palatable to her at the best of times, and under these conditions there was nothing to make her cling to it. She was a woman well past the prime of life, alone in the world except for distant

relations whose attendance upon her was a matter of duty rather than affection. It devolved upon these relations to insure that she was provided with nurses and medical attendance, ostensibly to alleviate the pain which it was impossible to cure, and to prolong the life which it was impossible to save. But the former consideration had to give way to the latter. Every device was resorted to to maintain an existence which had become intolerable to the patient personally and useless to the world around. Anesthetics were given to her, but their action was practically counteracted by the fact that she was roused from sleep or insensibility every half-hour, day or night, in order to have nourishment or stimulants forcibly administered. Thus her existence for weeks alternated between all-too-brief periods of insensibility when she lay brainless, useless, a mere breathing corpse, and the constantly recurring intervals when she was forcibly restored to consciousness and pain. More than once, I implored the nurses not to rouse her from a state of blessed forgetfulness, but they pointed out that they were forced to do so, lest she should sink into what was apparently a still more desirable escape from torment. Not only were their orders on this point stringent, but also they should enter the fulfillment and the result of such orders half-hourly in a book, for the doctor's inspection. It is difficult for those who have never been eye-witnesses of such a course of treatment during long terrible weeks, to realize the torture which it represents. To me it appeared almost diabolical in its misplaced kindness, and I remarked upon this aspect of it to the doctor. He acquiesced, admitting that had his duty been merely that of alleviating the patient's suffering while dissolution followed its natural course, she would have died painlessly weeks previously. 'Such a system is not only useless in a case like this, it is actively cruel,' he said, 'since it is in direct opposition to the patient's own clearly expressed wishes. But what can I do? The kindness which we exercise toward animals we deny to our own species. We are willing to recognize when members of the brute creation are "happier out of their misery," but when sufferers of our own species accept the individual application of that fact we will not permit them to follow the dictates of common sense. We illogically speak of their approaching death as a "merciful release," while we forcibly exert every means to combat nature and to prolong their torture indefinitely. In this instance, it was

the duty of the relations of the patient to see that she was provided with suitable medical attendance; and my duty, being so provided, is to extend her life thus to the utmost limit which science can contrive; not by so much as one brief half-hour may I allow nature to take its course.'

"Later, I saw this same friend when she was actually dying. She was propped upright into an apparently uncomfortable position by means of three pillows. I suggested that she would be more comfortable lying down. 'She wants to lie down,' the nurse informed me, 'but if I were to take one pillow away, the action of the heart would fail.' As the patient was rich and could afford to pay for close supervision, even the moments of death were to be spun out with a cruelty which, one is thankful to reflect, is not always rigidly adhered to in hospitals."

The argument usually brought forward from a religious view of the subject is treated by Mr. Percival with scant respect. That argument is, we are told, that, existence being a divine gift, we dare not assume to shorten it by one brief hour, lest we be interfering with the divine Will. But this argument would, if logically followed, tell against combating the course of nature by the use of artificial means to prolong life. The really serious and weighty arguments for the present course come from the practical side of the question—the necessity for mutual protection. These practical arguments run as follows:

"Except in public and just retribution for crime, to admit any condition under which it is permissible for a man to tamper with the life of a fellow creature would at once open the door to all manner of grave abuses. Do away with the legal and even the theoretical sacredness of individual life, and no man would be secure. Illness would acquire an added terror, and every deathbed be haunted by the dread of murder. The love of life, too, is strong, and even acute physical torment will often fail to make death desired. Also, and apart from the abuses to which such a system would give rise, it is not always possible for a physician of the widest experience and the most undoubted integrity to be infallible in pronouncing what is or is not incurable."

Without treating these arguments lightly, Mr. Pickering insists that the evils they suggest can be guarded against, just as similar abuses of power are guarded against in connection with the commitment of insane per-

sons. And he makes the following suggestions along this line:

"First, it should be criminal that the life of a dying person be shortened unless legal and incontestable proof be procurable that such an act is done by his individual wish. Secondly, it should be necessary that such a desire, attested by himself and corroborated by disinterested witnesses, be proved not to have been extorted from him by compulsion or intimidation. Special officials whose integrity was above suspicion might be appointed by government (like commissioners in lunacy), and the certificate of one or more of these should be necessary to prove the validity of the patient's desire for death, or even, it might be, to satisfy the scrupulous that the grounds for such a desire were medically justifiable. Further, and on this I lay particular stress, all publicity should be given to such cases of proposed self-destruction; it would be advisable that they should be previously announced in the papers, and it should be compulsory that they should only take place in a lethal chamber provided by government, and yet more, that such a chamber should be supplied with government attendants to whom, even at the last moment, the patient could appeal if desirous to be removed thence. Such precautions would at once preclude the possibility of foul play and the danger of deathbed murders."

Other objections to changing the present course of treatment are touched upon by the writer, and he follows up his argument as follows:

"It would be mere sentiment to argue that we never know when our life ceases to be useful to our fellows. Of what use to humanity could my friend's life be when existence alternated between a drugged torpor or the forcible administration of sustenance? Of what use to humanity were the sufferings of the other cases which I instanced? Of what use is the leper, eaten away by a loathsome and contagious disease? Of Oswald in Ibsen's play? Surely, when we are so far advanced along the valley, we may reasonably consider that we have paid our debt to humanity and have become free agents.

"And it is then, I repeat, that science should aid us. As it has taught us the art of living—of improving our race, of bettering the conditions of humanity—so it should teach us the art of dying. In that lethal chamber which I advocate, its discoveries should be brought to

bear upon the terrors of death to defeat them. Its knowledge should be exerted to contrive how the tortured sufferer can best sink to rest charmed by entrancing dreams, lulled by the strains of exquisite music, surrounded by the perfume of flowers, by all which might enchant his vision, and soothe his senses with delight. Is there not more common sense in such a system than in that which condemns us to be tortured, or still worse, to torture our dear ones under a strained conception of duty? Since movements of pain may seem an eternity, we can dimly picture to ourselves what months of lingering agony must often mean to the dying. And since we live knowing that any moment we may have to go down into that Valley of Shadow—we, or those whom we love—would it not rob that knowledge of all terror if we knew too—so far from being allowed to die when nature herself would permit it—that in the moment when suffering became intolerable, when all motive for protracting that suffering was over, then we might thus summon science to our aid, and without pain, and without disgrace, the rest which we craved would be accorded?"—*The Literary Digest*.



Pil. No. 50.

The Homeopathic Physician.

HOMING PIGEONS AS MEDICAL MESSENGERS.—Until recently, in this country, little has been known of the important part the homing pigeon has taken in the affairs of men and nations.

I have a bird in my loft named Petroleum, which flew from Mississippi City to Newark, N. J., a distance of 1,092 miles in twenty-seven days, during which time he was kept a prisoner twenty-one days. This performance, however, is very rare, and from extreme distances, such as from points above 500 miles, the birds are at a great disadvantage, inasmuch as they are forced to forage for themselves something they are not taught to do.

I recently purchased the fastest homer in this country. He flew from Wilmington, Del., to Newark, N. J., a distance of one hundred miles, in eighty-nine minutes.

My first use of the homing pigeon as a medical messenger was a number of years ago while attending a child, who was very sick with cholera infantum, nine miles away from home, without telegraph or telephone communication. Leaving my birds at each visit

the mother gave me full reports of the case during the intervals of my calls. One day my feathered messenger brought me word that the child was better, and that it would not be necessary for me to call till next day. Just at dark another bird arrived with a note stating the child was worse, and to come immediately.

When my patients keep homers, at my first visit I leave a basket of my birds and take a basket of theirs. By means of their liberating my birds, and I liberating theirs, it is possible to carry on a correspondence. Thus letters may be received and medicine sent for several days.

When a homing pigeon is about a week old a seamless band is placed around the leg, which cannot be removed when it grows older. Each band has the number of the bird and a letter which denotes the year the bird was hatched. These bands are issued and registered by the National Federation of American Homing Pigeon Fanciers, having for its object the breeding, training and racing of homing pigeons. Last year this organization alone issued over 70,000 registered bands.—N. H. Haviland, M.D.

The Medical Century.

CURETTAGE.—Of curettes there are many. For the purpose of removing loose pieces of secundines the dull wire loop will answer the purpose. But for thorough curettage, as curettage should always be performed, the sharp curette is required. Of these there are several, also. Perhaps the most satisfactory is the irrigating curette. Its stem is hollow and the distal end expanded for the fitting of a rubber tube thereon. It may be thus attached to a hospital irrigating jar or to the domestic syringe, and irrigation of the uterus be practiced while curettage is being done. In curetting for the purpose of microscopical examination it is better to use the plain instrument, without irrigation. But in cleansing the uterus after an abortion irrigation may be employed to an advantage. The intra-uterine wash may be permanganate of potash, bichloride solution, one to four thousand, calendulated water, Listerine, or other favorite solution.

To be effective curettage must be thorough. Every portion of the endometrium must be scraped and that thoroughly. It may be well to utter the caution that it is not necessary to injure the uterine muscle in the performance of the operation, but the free, intelligent use of the curette is demanded. The educated

touch will soon appreciate when the mucous membrane and soft structures have been scraped away and the harder muscular tissue has been reached. The return water from the irrigator will also tell its story of cleanliness within. So long as particles of debris wash away and the sharp blade of the curette tell of our dealing with soft tissue the performance should be continued. He who is afraid to curette properly, that is, thoroughly, should not curette at all, but call upon some to do it for him who is not afraid to do it properly.—C. E. Fisher, M.D.

The Minneapolis Homeopathic Magazine.

THE MODEST DOCTOR.—Modesty is generally supposed to be an innate trait of medical men. It is becoming painfully evident, however, that not all of the profession can boast of this redeeming virtue. We have been amused at the innocent manner in which one well known to us all, has quietly induced practically all our journals to publish a harmless looking article made up of sesquipedalian sentences and tremendously profound reflections concerning hair-splitting definitions, and accompanied by a foot note reference to "my little book," etc. The cleverness of this advertising is seldom exceeded. It compels admiration, as does the editor who reviews his own works in the columns of his own journal, to his own very evident satisfaction. Truly, the modest doctor is becoming obsolete. In these days one must not hide his light under a bushel; indeed, he must not only remove the latter with his own hands, but furnish with his own lungs the requisite wind to fan his own feeble spark into a vigorous blaze. This appears to be the up to date method.

[So far but two journals escaped this self-laudatory and self-advertising article].—Ed.

The Critique.

LET HIM GET WELL.—Dr. W. W. Keene, of Philadelphia, in discussing appendicitis at the Denver Meeting of the A. M. A., concluded his remarks as follows:

"I protest against the use of opium, except in rare cases, as it has a tendency to mask the symptoms of the disease and leads the patient to the grave. I protest against the argument of Dr. Niles, that every case ought to be operated upon and the appendix is never to be left. Out of three hundred post-mortems on as many bodies it was found that one hundred of the

individuals had had appendicitis at some time in their lives and had all recovered from the disease. They all died of some other disease. I challenge the assertion that through surgical operations all but two per cent of cases can be saved. I challenge any operator in the room to take one hundred well persons and operate upon them without killing more than two per cent. We all fail, gentlemen. I do not know why, but we all fail. I do not believe in operating on all cases of appendicitis. I'd rather have a live man with an appendix than a dead one without one. (Applause.) I do not believe with the witty Frenchman that no case is complete without a post-mortem. (Laughter.) If the patient is no worse after forty-eight hours of observation, let him alone; let him get well."

Cincinnati Lancet-Clinic.

MAMMON IN THE CHURCH.—These thoughts [the Siamese twinship of Church and Medicine] are brought out through a call from an exceedingly pleasant gentleman who handed the writer a business card of the "Western Methodist Book Concern, Printers, Engravers, Binders, Electrotypers, 220-222 West Fourth Street, Cincinnati." The introduction being through, the gentleman said he was canvassing for the mechanical department of the Book Concern, and would like to have an opportunity to bid for the work of the Lancet-Clinic. The writer suggested that possibly the Methodist Church, which conducts and owns the Concern, was departing from the lines of legitimate church work when it went out and sought through solicitors the commercial patronage of the public; that the work of the church was supposed to be mainly of a spiritual character, and devoted to a salvation of souls through conversion of the unconverted and a bettering of the condition of the poor and helpless, instead of going out into the highways and byways in search of business that was of a purely mercantile character for the financial profit there is in it, they competing with working people in business. It struck the writer that the church was getting into the Mammon field pretty far when such methods were being adopted.

For the church to have its own office and work-rooms for the printing and disseminating of its own church and other religious literature no exception can be taken; but when the field of Mammon is deliberately entered, with the deliberate purpose of rivaling other men and

firms in business, it seems to be very much out of its own proper and legitimate field.

As the gentleman who called was a clergyman, a very active and good one at that, the hospital diversion of patients from the hands of their medical attendants very naturally came up, in which it was further shown that the church was out and in the fields of commerce and even professional trade for the lucre there is in it.

This evil mentioned is but an out-growth of the ravening desire for wealth such as is displayed by the Western Methodist Book Concern of Cincinnati when it enters as a competitor for trade in common commercial fields. Its hospital in this city is now conducted upon a commercial basis, not as a charity, except as charity is made to further the financial betterment of the institution. Out for gold, that is the scheme; get it honestly if they can, but get it. That is the text devoid of glittering generalities. . . . So long as the church does the Good Samaritan act, confining its hospital work to purely charity patients, it has the sympathy and co-operation of the medical profession, but when the church becomes blind in its work, and takes to methods belonging to purely worldly occupations, thereby lowering the capital and business of its own members, there is something wrong. So, too, when it deliberately sets about the work of depleting the practice of reputable physicians by tolling patients out of their hands into hospital wards there is a wrong done that is despicable.

[Well, well! So another journal is daring to attack the benefit of clergy. If the church elephant sticks his trunk into the commercial shop he will be apt to have it pretty badly battered up. But in some of our medical schools we still permit this pretended church and holiness interference with our legitimate medical teaching and working].—Ed.

Hahnemannian Monthly.

Now let us come to the item that is first in importance to this Society, and dear to the heart of every homeopathist, our materia medica. In the early years of the American Institute its principal thought and work was on materia medica and clinical medicine. And good thought and good work it was. But the commendable work in the collateral sciences has absorbed so much of the time of our sessions that materia medica has been partially obscured and apparently relegated to second place. Yet the same men are working as ever,

the committee on drug-proving have done good work, and the materia medica conference has shown a faint renewal of interest in materia medica; but the majority of the profession have not given it the attention which its importance demands. Yet how shall we effect a revival? Only by increased activity in work. The lamented J. P. Dake agitated for several years a plan for a National Provers' College, but the scheme involved so much work and capital that it was impracticable.

Drug-proving at the present time may be more satisfactory than that of twenty-five years ago. Through discoveries in chemistry and electricity, the use of new instruments of precision for physical examinations, etc., physical conditions and pathological changes, which could not be discovered at the time most of our provings were made, are now possible of being noted with great precision. With this assistance much chaff might be eliminated, and perhaps valuable symptoms added. We have such a perfect system of materia medica that the addition of any number of properly proved remedies cannot destroy its harmony. Our existence as a school of medicine depends on our maintaining and enlarging our materia medica. The demand is on us to do this as a material benefit to medical science. As we prize our materia medica, let us enrich it with additional reliable provings, so that when future generations of this Society make pilgrimages to Washington to see the classic bronze we have builded in honor of homeopathy and its founder, they shall take just pride in their loyal ancestors of the nineteenth century.—From Pres. Wright's Institute Address, 1898.

North American Journal of Homeopathy.

THE PROPOSED NEW MEDICAL LAW OF ILLINOIS.—The Illinois State Board of Health and a committee from each of the three State societies have united on a proposed bill to establish a State Board of Medical Examiners. The bill calls for the appointment by the Governor of seven physicians, no one school of medicine to be represented by a majority, these physicians to act as the Examining Board. The first seven are to draw lots to determine their respective lengths of service; the first is to serve for seven years, the next six years, the next five, and so on down to one year. Each year thereafter the Governor shall, with the approval of the Senate, appoint one member to serve seven years in place of the member whose term expires. The Board

appoints its own secretary, who must be a licensed physician not a member of it.

After this proposed Board of Medical Examiners has been appointed and organized, all persons practicing medicine or midwifery shall, within six months, get from it a new license. All persons desiring to begin the practice of medicine or of midwifery after that time shall be required to pass an examination by the Board.

Now comes an innovation in medical legislation! All licenses expire at the end of twelve months. Each physician and each midwife is required to take out a new license once a year. All new licenses must be signed by the full Board, all renewals by the President and Secretary.

The reason given for making it requisite of physicians and midwives to renew their licenses each year is a legal one. The framers of the bill declare that when necessary to withhold a license mandamus proceedings by the applicant are necessary to obtain one. The Board is then placed on the defensive. To revoke a license where the holder had abused his privileges, as would be necessary were the license good for all time, would place the Board on the offensive. This is now the weak point in the medical legislation throughout the States.

The penalty of practicing without a license is fixed at a fine of \$100 to \$200, or imprisonment of from thirty to ninety days. Each subsequent offense shall carry a penalty double that imposed on the preceding conviction.—Editorial.

The Medical Advance.

ONION ODOR OF THE BREATH.—Referring to page 287 of the April Advance, I find the symptoms of "onion odor to breath" cured by *Sinapis nigra*.

Because of the same symptom and the peculiarity of existing circumstances, the following case may interest your readers:

Early in February of 1894, the little daughter of D. S., three and a half years of age, was brought to me concerning a serious prolapsus of the rectum, that had then existed some time. The mother described the condition as coming on during stool, and said that when, after stool, it was finally reduced, it would slip back with a snap.

The stool when constipated was dark and dry; when loose, was lighter.

It was frequent and scant, preceded by colic.

The little patient craved sugar and bread;

was pallid and fat, and was often found with damp stockings, from perspiration.

Her four upper incisors were decayed to the roots.

The urine was turbid after standing and stained the urinal yellow.

At 6 o'clock every night she became so tired and sleepy that she cried to go to bed.

At 8 p. m. she awakened, frightened, afraid to be alone, hungry, and insisted upon having hot coffee.

She would cry because of a skirt hanging on the wall, seeming to endow it with some dreaded personality.

She feared everyone who entered the house, and would hide behind her mother's skirts.

She had the "odor of onions" so strong in the breath that the little ones of the family would scold when she came near them. Yet she had eaten no onions.

The "small, scant stool," "prolapsus during stool," "waking frightened and demanding something refreshing, such as coffee," "fear of being alone," decided me to give *Ars. alb.* 90 m., and by the end of the month she was restored to her usual good health and spirits.

There is still another point. Perhaps a year preceding my prescription the family had owned a parrot, of which all were very fond. When the parrot died his skin was stuffed, and the little girl had carried it about from morning until night, petting and kissing it, according to her own sweet will.

Recalling the garlic odor of arseniuretted hydrogen, and the fact of the use of arsenic as a preservative by taxidermists, I insisted that the favorite plaything should be put aside. The result of this and the prescription eliminated the tainted breath, except under legitimate circumstances.—S. L. Guild-Leggett, M.D., Syracuse.



AGAIN THE HIGH POTENCY.

In the June number of *The Homeopathic Physician* we find a paper by J. Elliott Gilpin, Ph.D., entitled: "High Dilutions and Their Effects, from a Chemical Point of View." After reading this carefully and as understandingly as possible, for one who has forgotten most of his chemical knowledge, we arrive at the conclusion that Professor Gilpin and Professor Bailey, of Lawrence, Kan., are working the same mine, and it may be difficult to say in the end which of the twain has jumped the other's claim. The *modus operandi*, to be sure, is very different, but the end,

the absolute value of the very high dilution, stands out in both papers with astonishing clearness. Professor Bailey has more to say about electricity; while Professor Gilpin pins his examinations and experiments to chemical researches. It therefore begins to look as if soon it would be a demonstrable fact that a potency which could not get into the *Cyclopedia of Drug Pathogenesis* was yet loaded with medicine and capable of good and harm. Then, think what a hurrying and scurrying and mounting in mad haste there will be among that great mass of physicians who never permit themselves to think, but always follow the latest fad—to get in line for THIS newest fad—The Use of The Moonshine Potencies, because SCIENCE has demonstrated that they contain some particle of the original drug. Whereas in almost a whole hundred years the knowledge that the high potency has been CURING folks when properly applied, has gone for naught; and those few handfuls of the faithful who persisted in believing what their senses showed and taught them, were cranks and enthusiasts, with the same class of people for patients.



SECOND PART OF CYCLOPEDIA REPERTORY.

Part II. of the Repertory of the *Cyclopedia of Drug Pathogenesis*, compiled by Dr. Richard Hughes, lies upon our review table. It is in the same binding and of about the same number of pages as the first Part. As we have never been favored with a copy of the *Cyclopedia of Drug Pathogenesis*, notwithstanding our frequent request of the English and also of the American publishers, and have always had to borrow the one copy of the *Cyclopedia* that was in Cleveland in order to know what we have been criticising, this repertory will do us but little good beyond making a few more books to fill out our wall room. We sincerely hope, however, that Dr. Hughes' present work will be so practical that it will at once awaken such an interest for the *Cyclopedia* in the American profession that that shelf full of unclaimed books stowed away somewhere in the Institute may be bought up and used. But alas, the American profession is not much addicted to going backward, either in war or books. If Dr. Hughes, for example, instead of trying to purify Hahnemann's *Materia Medica*, had given his time to the invention or discovery of a new way of getting gold from sea water, or sunbeams from cucumbers, or adding one more to the one hundred sure

cures for consumption, he might expect to reap a large reward both in money and in honor. But America has too many medical books: so-called books, which are simply compilations of other and older books. This is true, though not so pointedly, of the homeopaths as well as the allopaths. If there could be but a famine of books for say five or ten years, or until something really new was discovered, how the profession would thank its stars! But this has really naught to do with the value of the labor of Dr. Hughes, which is recognized on all hands. He is as an indefatigable workman as he is student, and his work is uniformly, as in this instance, well done.



THE HEALTH OF NEW YORK.

A few days ago the New York World came out with a flourish regarding the improved health of New York City, purporting to quote as their authority the report of the Department of Health, showing a decline in the death rate to 18.66 for the first six months in 1898 from 19.60, the rate for the six months in 1897.

It is to be hoped that this decline in the death rate does really show an improvement in the public health, but it is by no means certain that it does so; and the glorification of the World and the implications of the weekly report itself, illustrate that misuse of statistics which has brought them into so much disfavor; and yet, properly, i.e., scientifically used, no evidence is more conclusive than that of statistics.

Of course it is to be expected, as well as hoped, that this fall in the death rate indicates an improved sanitary condition; but in the first place the time is too short, the comparison too limited for the fall to be anything but a matter for hope. The "Weekly Report" of the Board of Health leaves out certain important data without which it is impossible to form a correct judgment; and it is greatly to be regretted that this omission should occur in an official document of so much importance as the report of the Board of Health.

What is the birth rate?

If the birth rate is not diminishing, and the immigration of adults is not in excess of the births, then an improvement in the public health may be predicated; but, if the influx of adults is large, or the birth rate has diminished, then the diminished death rate ceases to be of any value as a guide to sanitary conditions.

A large proportion of the deaths in any community occur among infants under one year, so that if the birth rate has largely fallen off, or if the influx of adults has been very great, a decline in the death rate would be perfectly consistent with an impaired state of the public health and a lowered vitality.

It is to be hoped that the future reports of the Board of Health will give a series of birth rates for comparison, and, if possible, the adult immigration into New York City.

M. R. L.

Book Reviews.

King's American Eclectic Dispensatory.—New edition. Entirely rewritten and enlarged, by Harvey W. Felter, M.D., Adjunct Professor of Chemistry in the Eclectic Medical Institute, Cincinnati, O.; Co-editor Locke's *Materia Medica and Therapeutics*; President Ohio State Eclectic Medical Association, etc., etc., and John Uri Lloyd, Ph.M., Professor of Chemistry and Pharmacy in the Eclectic Medical Institute, Cincinnati, O.; formerly Professor of Pharmacy in the Cincinnati College of Pharmacy; Ex-President of the American Pharmaceutical Association; Author of the *Chemistry of Medicines; Drugs and Medicines of North America; Etidorpha*, etc., etc. Two volume edition, royal octavo, each volume containing over 950 pp., with complete indexes. Cloth, \$4.50 per volume, post-paid. Sheep, \$5 per volume, post-paid. Advance subscriptions received by the Scudder Bros. Co., No. 1009 Plum street, Cincinnati, Ohio, general agents.

Accident and Injury. Their Relations to Diseases of the Nervous System. By Pearce Bailey, A.M., M.D., Attending Physician to the Department of Correction and to the Almshouse and Incurable Hospitals; Assistant in Neurology, Columbia University; Consulting Neurologist to the St. Luke's Hospital, New York City. New York: D. Appleton & Company, 1898.

This book is another one that "fills a long-felt want." It is in line with the practical medicine of the day. There is not a physician in active practice who will not have to do or who has not already had much to do with accidents and injuries, in which he is made an unwilling witness for or against some case of accident. To such a one a reading of these interesting pages will be very beneficial. Dr. Pearce goes deeply into his subject, and almost furnishes a complete treatise on nervous disorders arising from whatever source. The illustrations are fine and explicit. Dr. Pearce's style is excellent and clear. His original design was to give merely a systematic description of the nervous affections which result from injury and fright. But from this single idea the present magnificent volume grew,

embodying, of course, the original design and much, very much more. If the book can be borrowed for a little while turn to the chapter on Traumatic Hysteria, and a very good idea of the rest of the book can be formed. It is a valuable acquisition to the general physician's library.

Harper's Monthly Magazine is full of information that is fresh and timely. It never contains a dry or prosy page. For August it has a paper on Mr. Gladstone: *Reminiscences, Anecdotes and an Estimate*. The *Fish-Warden of Madrid* is well presented and embellished by a series of A. B. Frost's pictures. The *Convict System in Siberia* reminds one somewhat of the Kennan papers of a few years ago. *Roden's Corner* is concluded in this issue. This has been a wonderfully interesting story and kept up its interests to the close of the last page. The illustrations by Thulstrup are very graphic.

Lippincott's for August has a completed story: *Harry Bradley, the Playwright*, which has not a line of tiredness in all its many pages. It trips along smoothly and naturally and carries the reader's interest to the end. It is remarkably well written, and places it in the category with *Ten Minutes to Twelve*; and *Jason Hildreth's Identity*. It has other shorter stories that are as good as the larger ones. The funny pictures at the back are never lacking in amusement and carry their lesson and moral. Lippincott continues good and wholesome. Long may it live and contribute of its healthfulness to the reading public of the land.

The *American Monthly Review of Reviews* is up to date. The July number has much to say of Hobson and his men and other burning topics, while the August issue deals with *Our Battle with Cervera's Fleet*, *The Siege and Capture of Santiago*, *Watson and His Squadron*, and also handles the *Hawaiian and Philippines questions*. It is, indeed, refreshing to turn at the close of the month's reading of trashy daily papers, which, at best, are gotten up apparently to sell the greatest number of issues, no matter whether based upon truth or the rottenest kind of falsehood—it is refreshing to take up this independent journal and read the record of actual facts. We expect in the next issue to have this fearless journal take up again in its dignified and logical way the incompetency shown somewhere in the direction of our Spanish war and

handle it without gloves as it deserves to be handled. Some one ought to be flayed alive for the present unsanitary condition of our brave boys in and around Santiago. "Teddy" Roosevelt may have been impolitic in permitting the publication of his protest, but it was the truth and in the interest of the lives of the soldiers, and, therefore, was right to be told. The busy doctor cannot well afford to be without the American Review of Reviews upon his table.

Scribner's for August comes to us in a colored cover which is of itself a work of art. This is a Fiction Number. Richard Harding Davis gives a paper entitled, The Rocking Chair Period of the War, which deals with the waiting period at Tampa. It is well described; it could be no other way coming from the pen of Mr. Davis. Another bright and interesting paper is by Spears, The Chase of the Cervera, which has reference to the appearance of Cervera at Martinique and those parts, the chase ultimately winding up in Santiago harbor. Still another "warm" paper is entitled, Episodes of the War, and this has to do with the first engagement of American troops on Cuban soil. All of these war papers are profusely illustrated, and as the illustrations are in the main copied from photographs and done in half-tone there is but little likelihood that the pictures are not true to the incident they are called upon to illustrate. Then there is a series of papers dating back to the revolution, which shows the active part taken by the South in that early time. The fiction part is up to the standard of Scribner, which is of the first class. It is a very interesting magazine.



Globules.

A beautifully engraved invitation from the faculty and senior class of the Homeopathic Medical College of the University of Michigan was found among our mail. This commencement took place Thursday, June 30th. We congratulate the Ann Arbor school upon its rehabilitation, its present success, and upon the glorious future which awaits it.

The Homeopathic Medical Society of the State of New York will hold its forty-seventh semi annual session at Syracuse, Thursday and Friday, Sept. 22 and 23, 1898. Especial attention is called to the change in the days of meeting, it being formerly on Tuesday and Wednesday. President Norton is sure of a

good session, since no man was appointed to a bureau who did not obligate himself to attend and do his best. Though for that matter, the sessions of this enterprising Society are never wanting in interest and enthusiasm. It is our banner state society.

On our return home from the west we learn with deep sorrow of the death of Mrs. Nelly Otis Sanders, wife of Dr. John Kent Sanders, of Cleveland, after a fortnight's illness ending in peritonitis. We had the great pleasure of frequently meeting Mrs. Sanders both in Cleveland and at several of the Institute meetings, and had learned to regard her very highly for her many estimable and charming qualities. Our sincere sympathy and condolences to her bereaved husband.

We found Dr. R. S. Copeland's card under our door one day this week, giving evidence that he looked us up, but as we are bachelor-ing now, we are not in except in regular office hours. Dr. Copeland is the popular professor of ophthalmology and otology in the Homeopathic Department of the University of Michigan, Ann Arbor. We have had occasion quite recently to refer to the very excellent work done by Professor Copeland, and the great esteem in which he is held by both faculty and class.

When you are traveling, especially if your wife accompanies you, there is nothing more handy and compact than one of Stallman's Dresser Trunks. As its name implies, this is a three drawer dresser put in the form of a modern trunk with other drawers and receptacles for clothes. Look at the cut in our ad. pages and assure yourself of the practical convenience of the trunk.

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The American Homeopathist.

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The American Homeopathist.

NEW YORK, SEPTEMBER 1, 1898.

FRANK KRAFT, M.D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



E. J. EVERETT, M.D.,
Barney, Iowa.

THE HAHNEMANN RE-BURIAL.

"The Exhumation of the Body of Hahnemann at the Cemetery Montmartre and of its Removal to Pere La Chaise" is the title of the leading article in the July number of the (London) Homeopathic Review. It consists of a translation of the proceedings as prepared and printed by Dr. Francois Cartier of Paris

in his (French) Journal of Homeopathy, preceded by a masterly article reviewing in brief space the life and work and death of Hahnemann. The facts of the exhumation and reburial are that on May 24th last, in the presence of the civil authority and of thirty-five other persons the body of the Master was lifted out of its obscure and borrowed grave at Montmartre (which this editor and his six American compatriots found after much difficulty in the fall of 1896) and removed to Pere La Chaise—the famous cemetery of Paris. On raising the leaden coffin it was found that the lid, instead of being soldered, had been closed with screws. When these were removed the coffin was found partly filled with water. Although the body was identified as undoubtedly that of Samuel Hahnemann it was done by aids other than the familiarity of feature, as the head proved to be a mass of corruption, notwithstanding the embalment. His wedding ring was found. Also a gold medal with his profile. And in a bottle was an autograph letter from his wife giving the name and date of birth and death of Hahnemann, establishing beyond a doubt that this was the right grave and this the body. A number of speeches were made, one by Dr. Hughes, and others by representative homeopaths. The new sepulchre is described as being on one of the most picturesque roads in this cemetery, planted with a variety of trees, and having about it something beautiful and awe-inspiring. At every corner of this road "the mind lives over again with all the grand and celebrated men that France has sheltered in science, the fine arts and war. Here music is represented by Rossini, Auber, Donizetti; there the poets and celebrated writers, Racine lies almost beside Hahnemann; a little further on are Moliere and Lafontaine; science is represented by Guy-Lussac and Arago. The celebrated physician and neurologist, Gall, is

a few steps lower down than Hahnemann. Lastly, on the same side are the tombs of the marshals of the First Empire—Ney, Davout, etc. The chemin du dragon is the route usually taken by tourists who visit this renowned cemetery—the chief in Paris—by thousands.”

The AMERICAN HOMEOPATHISTS join in congratulations to the International Homeopathic Society, and in particular to the French brethren, for their marvelous expedition and success. It was only in the fall of 1896—at the International Homeopathic Congress at London—that this committee was appointed upon the request of Dr. Leon Brasol. And in this short time it has broken down all the barriers, legal and otherwise, and rescued the body of our Grand Master from the ignominy of a borrowed tomb, nameless and forgotten. The editor of the AMERICAN HOMEOPATHIST will never forget the morning he spent with his compatriots in trying to locate this grave in an obscure and dreadfully crowded corner of this cemetery. It reminded him very much of that lying ground which poor Jo watched so long and from the step of which he swept the filth and soil. It was a sin and a shame! But there was no help for it. There were legal difficulties that could not be removed except with patience and time. The French brethren headed by that indefatigable worker, editor and homeopath, Cartier, finally succeeded in breaking down the last restrictions; and so it has been brought about that our honored and First Grand Master has at last been raised from his temporary burial in the rubbish of the Temple and now lies in the very sanctum sanctorum itself, safely at rest where his ever-increasing followers may visit and pay that tribute to his resting place to which his great work so justly entitles him.

And now, American brethren, let not our purse strings be drawn against this new monument. The Washington monument will be a distinctly American offering. This at Paris is the World's tribute. We must not permit all the other countries to contribute and ourselves stand aloof. The Tomb Committee looks to every homeopath for his mite. The European brethren are contributing meely. But it is America with its many thousand prosperous homeopaths who must give proof of its sympathy for the work of our French brethren, and our love for the Master. Ah, if it could but have been foreseen, how well it might have suited either to bring the body to Washington, or take the monument to Paris. Send a few dollars at once to Dr. Francois Cartier, Rue Vignon, 18 Paris, direct; or to

Bushrod W. James of Philadelphia; or to the editor of the AMERICAN HOMEOPATHIST. No matter to which; but send it, and send it quick! The cause is a worthy one.



REPORT OF TWENTY CASES OF LARYNGEAL DIPHTHERIA.

L. C. McELWEE, M.D.,
St. Louis, Mo.

Read before the Missouri Institute of Homeopathy, 1898.

I have taken as a caption what ten years ago was a mooted question; one in the discussion of which, strange to say, there were many ill feelings engendered by the differences of honest opinions which were held by different members of the profession. Having studied the matter independently for ten years past, I have come to the conclusion from the appended list of cases that the condition formerly called “membranous croup” is nothing more nor less than diphtheria located in the larynx, bronchial mucus membranes and the rhyma glottis. The question will be dropped at this point, as I do not care to raise a discussion of the point, and would rather it should not be taken up at this time, as the more important point of treatment and results are the theme here wished to be considered.

Case I.—My first case was that of a Hungarian baby, fifteen months old, which originated from a case of ordinary diphtheria that I treated and from which the child recovered. The two children were in the same room much of the time, though belonging to different families, until I was called to see them and ordered them separated; the history being that the older child was sick for three days before the second one complained, and they had been together during those three days much of the time. The onset of the disease was as usual in the ordinary case, the baby beginning with fever and laryngeal cough. This was during the winter of '87-'88 when St. Louis was scourged with diphtheria worse than ever in its history. The treatment of the two children was as strictly homeopathic as I could make it, the baby getting acon., hepar. and bromine in succession, and finally dying, while resting quietly, on the fourth day of its illness, practically from asphyxiation. At that time I was of the opinion that “the indicated remedy” was all-sufficient to cure anything.

Case II.—Was a girl eight years old, who was sick at the same time as her sister six years old. They both contracted the disease

at school, and in both it began by show of membrane on the left tonsil. They both got lach. 30x, and the younger one rapidly recovered, while the remedy seemed to have little or no influence on the older one and the process extended from the tonsils into the larynx, being accompanied by the usual shrill cough, distress for breath, and suffusion of the skin with perspiration, contracted pupils and cyanosis. Chlorine, iodine and bromine were given in succession according to the symptoms as they arose, but the process continued without as much as a sign of abatement, and the child died on the sixth day, leaving my belief that "the indicated remedy" was all-sufficient, somewhat disturbed.

Case III.—I was in consultation with Dr. W. J. Gundlach when I did my first tracheotomy, with his assistance, and the patient received kali bich., spongia, lach. and lyc. in succession, together with much attention to bathing, stimulation and feeding. After a somewhat lengthy convalescence the patient recovered. The membranous formation, however, continued for some time after the tube (in this case a drachm vial, at first) was put in until the cheeks and gums and under surface of the tongue were covered with membrane. Nitr. ac. seemed to finally stop the formation of the membrane. The heart was kept sustained by material doses of digital. until it ceased to intermit.

Case IV.—Was seen with Dr. W. L. Galloway some two hours before it died. It was a boy four and a half years old, and had been treated by Dr. Galloway with great care and good judgment, he having given iodine from the beginning, and from the complex of the case it seemed to me that he could not have done better. His adjuvant measures were the best that could be commanded, and when they were all exhausted and the doctor saw that remedies were of no further avail, he called me to see the case with him, with a view to tracheotomy. This we decided as being immediately necessary, but because we could not promise the father that the boy would get well with mathematical certainty he refused to permit the operation and the boy died in a few hours. His strength was considerable, his pulse good and his mind clear, with only a moderate degree of pupillary contraction, so that I think if tracheotomy had been done he would probably have gotten well.

Case V.—Child two and a half years old, one of five who had diphtheria, coming down one after the other and all recovering but this one. She was first to get it and got almost

well of the attack, so that she was no longer thought of as being a cause for concern at all. Her oldest brother being last to get it, and she being fond of him, crawled up on his bed and pushing her face up close to his, went to sleep and breathed his breath for three hours, during which time there was a change in the weather with a drop of forty degrees, so that when she awoke she was sneezing and coughing from the cold taken from being uncovered while asleep. There was a fresh infection of the entire bronchial mucous membrane, and no remedy that I could give did one whit to check the progress of the disease. Tracheotomy was done to prevent immediate asphyxiation, but the child died forty-four hours afterward of necremia, or heart failure from toxemia.

Case VI.—Child two and a half years old, the only one of a family of three that had the disease. Her trouble began with the membrane forming on both tonsils at the same time. She was a chubby, fair-skinned baby, and there was a great deal of rattling in the chest during respiration and cough so that I gave kali bich., with no benefit that I could see, as the process extended into the larynx rapidly, and at the end of the third day I did tracheotomy. The patient rallied nicely from the operation but died in thirty-two hours from heart failure or toxemia. Adjuvants of steam, etc., in the room made no difference. Her sister got the tube and put it in her mouth after it had been removed after death without infection.

Case VII.—The next case was a boy eight years old. He came to the office to see me so hoarse that he could not talk loud enough to be heard to the back of the house. Examination of the throat revealed membranous formation on epiglottis and a little just above it, but no more was in sight unless some disintegrated speck on the tonsils could be called such. The mother said that she had kept a close watch on the throat and that there had not been any patch on the throat. So, with the hoarseness, the boy's blonde complexion and the fact that the membrane seemed to be coming out of the larynx into the throat, I gave brom. in various potencies. But it was necessary to do tracheotomy on the second day from that to prevent death from asphyxiation. With careful dieting, keeping the atmosphere of the room as free from dust as possible by saturating it with the vapor of steam, the boy recovered in the reasonably short period of ten days.

Case VIII.—Boy seven and a half years old,

dark complexion, spare and wiry, but vigorous and strong. Patches developed on tonsils, the left one first, and extended on into the larynx. Lach. did no good, and as soon as the cough became shrill and croupy I gave iodine 6x dil. and had spray of papoid used every half hour. At the end of three days the boy was breathing easily, and by the end of a week was practically convalescent.

Case IX.—Two or three weeks after that a lad in the next house became sick in the same way, and after treating him for two days without benefit the physician gave antitoxine, 3000 units, and left. The family were so frightened at the appearance of the child, that yielding to the solicitations of the mother of the boy of the last case, I was sent for, and reached the house at the same time with the other physician, he being apprised that a consultation was on tap. We went over the case, but I could only recommend iodine, as the case presented all the symptoms as the last one above. Tracheotomy was mentioned, but left to a later visit to decide. At the later visit we decided that it should be done, but the physician whose case it was did not know me very well and wanted one of the three surgeons of his school who have the greatest reputation, to do it, but they could not be found. I modestly suggested that I had done it several times, but the suggestion didn't meet with favor, and while we waited for one of the three celebrities the patient grew so much better that the operation was no longer necessary (we waited thirty hours), as something so dissolved the membrane that the breathing, though labored, was free enough not to be alarming any more. The patient made a good recovery. This was the first experience I had with antitoxine in this condition, and as it dissolved the membrane from the larynx I naturally came to the conclusion that it must be much or entirely the same process as diphtheria, though in different locations. I had found that one of the most certain actions of antitoxine was to dissolve the membrane.

Case X.—Boy, aged six, who had diphtheria formations on both tonsils at the same time, which ran along the usual course for three days, when it seemed to suddenly extend into the larynx, and the physician in attendance became alarmed and gave up the case when I was sent for. I found the child breathing freely, but thought that antitoxine would dissolve the membrane out, having found previously a nearly certain action of the serum. Gave Behring's No. iii. 1500 units at 4 p. m. and returned the next morning at 9

o'clock, finding no improvement, but possibly the contrary. Gave Behring's No. iii. 1500 units, and returned that night at 11 o'clock, finding no improvement in the breathing, so immediately opened the trachea and put in the tube. The child was practically well in four more days, at which time I removed the tube.

Case XI.—Girl, aged four, whom Dr. Wolfer asked me to operate for her. The child was breathing with the greatest difficulty when I saw her, so I immediately gave her Behring's No. iii. 1500 units, and did tracheotomy immediately after that. With the trachea held open I could easily demonstrate to the parents and the doctor the pseudo membrane lining the tube, and I presume much of the entire bronchial tree. The tracheotomy tube was removed at the end of the fourth day, and the child discharged as cured in one week from the date of operation. She had been sick two days when I was called to see her, and the membrane had extended from the tonsils into the larynx.

Another child of the family had diphtheria from exposure to this one, and a bacteriological examination was made of the patient in question, confirming the diagnosis, the membrane not forming at any other place than on both tonsils.

Cases XII and XIII.—These cases were diagnosed diphtheria and bacteriological examination made which confirmed clinical diagnosis. They were treated as homeopathically as I knew how, but the membrane extended into the larynx and they gave me great uneasiness for some time. Just as I was thinking seriously that they would have to be operated, they began to improve and got well without it. The remedies I gave in both cases (because the symptoms were alike) were lach. to begin with and calc. c. following. The latter remedy seemed to work the curative effect.

Case XIV.—Child, two years old. The physician had prescribed bromine, appropriately, as nearly as I was able to judge, and called me in counsel. We gave antitoxine (Mulford's, 1500 units), the family refusing to allow tracheotomy, which I strongly urged. The child died of asphyxiation in twelve hours.

Case XV.—Boy, five years old. Had diphtheria, typical lach. case, as his physician and I both thought; seemed to improve for two days, when suddenly one night he developed the shrill croupy cough. Iodine seemed to then become indicated, but the child grew so alarmingly worse that we did tracheotomy and he was well in six days. He got 3000

units of city antitoxine the night he got worse, and 1500 units after the tracheotomy was finished, eighteen hours after the first serum.

Case XVI.—Girl, a child two years old. Membrane extended from the tonsils into the larynx; city antitoxine on fourth day, tracheotomy the next evening, 1500 units more antitoxine. The heart was feeble and intermittent a great deal of the time. On the eleventh day after the operation the tube was removed from the throat and convalescence seemed to be on with a will, but on the fifteenth day after the operation the patient suddenly died of heart failure, which had threatened all the time. This patient was cared for by a stubborn nurse, who did not believe in new-fangled ideas and who would not follow directions regarding feeding. Had proper nourishment been given (which was provided) a different result may have been recorded. The heart was supported by gels. 3x, followed by digitalis in three-drop doses.

Case XVII.—Brother of the above a year and a half older. The larynx was the first place involved. As soon as it was clear that the remedies administered were no longer of use I did tracheotomy and the boy was practically well in seven days. He got 3000 units of the city antitoxine just before and after the tracheotomy, 1500 before and 1500 afterward. The three above were patients of Dr. T. Conzelman.

Case XVIII.—Boy, six and a half years old. He came to my office with all the physical signs of malignant diphtheria except the membrane. From the symptoms I prescribed arum. triph.; saw him the next day at home, gave nitr. ac.; saw him the next day and some improvement was noted. Tonsils had gone down, fetid discharge from the nose was better and now I could see a little disintegrated looking membrane on the pharynx which had been obscured before by the greatly swollen tonsils. There seemed to be no trouble ahead, so I felt easy. That night I was hastily summoned to see him, as he had developed a harsh, croup cough and there was a good deal of dyspnea. The breathing continued to get worse. At this visit I gave 1500 units of Parke-Davis' antitoxine. Twelve hours after that I did tracheotomy and gave 1500 more units of the same antitoxine. The tube was removed at the end of four days, the opening closed two days after that and the boy was well a week thereafter, though as a matter of extreme precaution I kept him flat on his back for another week, when I allowed him to sit up. Kept his heart sustained by three-drop doses of Squibb's digitalis every three, four,

six or twelve hours as he got better and better.

Case XIX.—Boy of eight years, in which the membrane first formed in the larynx. There was no source of contagion that could be ascertained, but it came and had nearly conquered, when the boy was intubated, using the largest size, and 3000 units Behring's No. iii. antitoxine was given, and the boy was well in five days.

Case XX.—This case is merely a repetition of the above, with the exception that the patient was a girl of five years.

SUMMARY.

Total deaths, 8.

Total percentage of mortality, $33\frac{1}{3}$ per cent.

Recoveries, $66\frac{2}{3}$ per cent.

Cases treated with "the indicated remedy" alone, 6; mortality and recoveries each 50 per cent.

Cases treated with "the indicated remedy," antitoxine and tracheotomy or intubation, 2; mortality and recoveries, each 50 per cent.

Cases treated with "the indicated remedy," antitoxine and tracheotomy or intubation, 2; recoveries, 11; $91\frac{2}{3}$ per cent; mortality $8\frac{1}{3}$ per cent.

CONCLUSIONS.

I.—The indicated remedy is NOT all-sufficient to cure all cases, though well chosen, but its importance must not be underestimated. It must not be changed after the other measures are instituted, because the symptoms in all probability are not those of the disease.

II.—The indicated remedy and antitoxine, from the foregoing, would be no better, but it must be remembered that there are only two cases from which to judge. From other experiences with this remedy, I am sure that if administered early in the case, success will be achieved and tracheotomy avoided in a large number of cases.

The indicated remedy and antitoxine are better combined than either alone, the first preventing further formation of toxins, and the latter neutralizing those already formed.

III.—Mechanical relief of a mechanical condition (occlusion of the rhyma glottis), coupled with medicinal measures and antitoxine, give highly satisfactory, if not to say ideal results.

IV.—The indicated remedy plays a very important part in the cure, though obscured by the brilliant effects of the tracheotomy or intubation first, and the antitoxine next. It must be remembered that there cannot be found

any table of cases with as high a percentage of recoveries and presenting as many cases as this under old school treatment, where "the indicated remedy" is an unknown quantity. The part then played by it would be represented by the difference between the percentage of recoveries here recorded and that of the other way, presenting an equal or greater number of cases.

V.—The pathological condition is the same as diphtheria, it having reacted to the same curative measures and bacteriological tests, and come from ordinary cases of diphtheria, and being communicated, produced ordinary diphtheria.

VI.—The time to give the antitoxine is when in doubt as to the advisability of its use; and

VII.—The time to intubate or do tracheotomy is when in doubt if it should be done. The good reasons for this are many.

ANOTHER OMAHA LESSON.

Another lesson taught us at Omaha, in addition to the editorial use of molasses, and which the Medical Century has not mentioned is that the American Institute of Homeopathy without its wheel-horses is a very sorry institution, indeed. We have, in time but recently past, been of the foremost to deplore the absence from high places and places of trust and emolument of the young man, and the new man, and the One Woman; but that was not to say that all the recognized leaders of the institute were to be relegated to the superannuated list and be heard of no more by the membership except when engaged in attending all the meetings and holding their seats and tongues at the same time. That was not our idea at all. We have seen enough in the last two or three sessions of the American Institute to make us feel a little dubious about any policy vigorously carried into execution which will oust the real leaders and put in their places new men, ambitious men, and men who apparently will not come to the Institute except it cast its tent in their front door yard, or they have a home-grown candidate for some office. When the office-holdings and committees alone attract men, then the purposes of that organization are lost and the society will speedily disintegrate. The Institute of to-day is the result of work, not of a constantly changing personnel in all its varied departments. Indeed, if that policy had ever fully obtained there would to-day be no

Institute. It would have begun with a primitive love-feast and ended in a very few years in a political cat-fight. But it is the power that it is because a few men—call them a "ring" or any other hard name that likes you best—because a few men stuck to the work through thick and thin, through good report and bad, during the lean as well as the fat kine periods. They have held offices and committees continually for years, it is charged and has been statistically pointed out. Suppose that were really true, what harm has been done? Has not the Institute prospered and waxed stronger and stronger and become more firmly knit together under this rule of keeping the working members of the Institute in harness right along?

To come from generals to particulars: see what has been brought about by the absence of several of our best known and formerly most enthusiastic of members. Let us begin with Timothy Field Allen. There is no doubt whatever if he had been present at Buffalo or at Omaha, the Materia Medica Conference would not have gone a-glimmering. Certainly it would not have taken that evil tangent at Buffalo which brought about its early dissolution. And by which twisting of its purpose we lost as a visitor at Omaha this last session no less a person than the scholarly Richard Hughes. As soon as L. T. Talbot ceased to appear in the meetings and "boss" things, the committees in which he was deeply concerned have notably fallen away. Take, for instance, that Interstate Committee. No one could have been more anxious about its success than Talbot. It has done well under the ministrations of Norton and Clokey, but they have worked almost single-handed; but how much more might it not have accomplished had Talbot and Kinne and others of the elders been there? Then there was that movement to appoint a lot of foreign corresponding members, for which good reasons were assigned. What has become of it since Talbot has been dry-docked? Dewey tried to have three foreign homeopaths appointed; he succeeded in getting one! The Committee on Drug Proving has been drawn in as an example of the do-less-ness of certain committees. Yet it would not surprise us to learn that it was because some of the "ringsters" were removed and their places taken by ambitious and earnest but incompetent men in whom glowed the Promethean fire—but only for one year. View that Memorial Committee. Bushrod James is absent and the committee almost

goes by default; Runnels was called home by sickness; had it not been for Biggar's noble address the service would have been a dead failure. Are we so soon forgotten when we are gone? Is our memory of less worth than to-morrow's President? Look at the Inter-collegiate Committee. Does anyone believe that the trouble with Dunham College would have assumed its present form; or that there would have been given admission to another school into that charmed circle—a school whose homeopathy, according to most recent advices, consists of an extra large sign in black and gold across the house front and a Chair in Osteopathy—does anybody believe these things would have come to pass or reached the present aggravated form had Talbot and a half dozen of the old "ringsters" sat in that sanhedrim?

Why can't the Institute draw our poet-laureate, Helmuth, to its altar even when it meets almost around the corner, as it did at Newport? Why does he find attractions in Europe or elsewhere when the Institute knocks at his door? Is not this charge of ring-tactics and old membership monopoly in part responsible? How lonely and forsaken the meetings have been without Kinne, and Talbot, and Cowperthwaite, and Talcott, and Kellogg, and Conrad Wesselhoeft, and Korndorfer, and Parsons, and Chase, and Buck, and those many others of the older membership who used to honor us with their presence and counsel. Take out of the Omaha sessions Dudley, and Ludlam, and Walton, and Peck, and Comstock, and McClelland, and Green, T. F. and H. M. Smith, and a possible baker's dozen more, and what would you have left? A very sorry meeting indeed. This was a western meet, and the West responded well as to numbers and as to vote. But why didn't the West, and the young man, and the new man make themselves heard as well as felt in the meetings? There was no gag put upon them that we are aware of. We sat through all the business meetings from beginning to end, and we know that when there has been taken out of the record, at the very highest, one-half dozen speakers the remainder will be the old members who always take a hand. It is the same with the sectional work, which is now being turned in by the stenographers. Take out at most a dozen new names (these mostly from Chicago), and it will be found that the open discussion, free to all, was done by the older members. Let us be reasonable when we "kick." If a member becomes a member with his eye singled to the glory of

officehood or chairmanship, or committee work, he had better be left outside the Censors' door. The object for which membership is sought in the American Institute of Homeopathy is the "Improvement of Homeopathic Therapeutics and all other Departments of Medical Science;" and by no means the getting of office. Fancy how lonely Dake and Lilienthal and Sawyer and Holcombe and those other "ringsters" of the more recent past would have been at Omaha had they dropped in on Sunday night to see how their Institute, the rejuvenated Western Institute, was doing!

Suppose we let up on our onslaughts on the Seniors and the Officers and the Committee personnel for a while, and, instead of pulling them down, which helps no man, let us devote ourselves to pulling up the young man, and the new man, by no means forgetting our One Woman. Let us bid them take heart of hope and meet with us every year and take part in the Transactions. There is something in the Institute beside office-holding. If a man in office is guilty of "vile demeanor and usage bad," turn him down. But if he does his duty well, it is utter folly to change him for a new and untried man whose chief recommendation may lie in his geographical accident and not his superior qualification for the office. There are certain offices that are honorary and ephemeral; but there are others that are vital to the organization, notably the General Secretary, and the additional duties performed by the Assistant Treasurer. Any one familiar with these two offices will hesitate a long while before advocating annual changes. The same is true of the Censors and many of the Committees. No, it is a sad mistake to make the Institute but an office-holding society, with nothing to bind the membership save the possibility of being elected to office or of serving in committee or sectional work. We need the "ring" men to keep us from falling to pieces. Now that we have catered and curtsied to the new member and the young member, and have beheld the results, let us have turn about and woo the old members again and see if we can't get the wheelhorses back into the traces once more.

We are writing this with no evil eye to the young man or to the West. We are ourselves some distance removed from baldness and senior-age and are of and for the great and boundless West. But this is a question of the life of our Institute. If our wheel-horses are unhooked and turned out, and new teams put

in each ear—does it need a blue print to predict the result? There is lots of room for the young man and the new man, and the man fired with ambition; still we must all serve our entered apprenticeship before we can become fellow craftsmen and, eventually, masters. Patience, dear brother and sister; there is no "ring" in the American Institute of Homeopathy. Cheer up and come more frequently to the meetings, bringing with you, besides your vote and your political influence, the best there is in you, and then take part in the meetings both before and after the election, and soon you will be given work to do.

As we said at the beginning this is another lesson which the Omaha meeting taught us, and one that our brother of the Century failed to mention in his recent "Some Sacrilegious Suggestions."



Pil. No. 50.

Pacific Coast Journal of Homeopathy.

Oil of Wintergreen in Rheumatism.—According to M. Lemoine, local applications of oil of wintergreen are valuable in rheumatic fever, acting more rapidly in relieving pain than salicylate of soda and being less liable to produce tinnitus or giddiness, which sometimes follows the use of the latter drug. He soaks a piece of lint in two or three drachms of the essential oil, and applies it to the skin; the whole is then completely covered by oiled silk, which well overlaps the lint, and carefully bandaged so as to prevent external evaporation. The application is made over the painful spot if this is conveniently situated; if otherwise, the thigh or arm is chosen. In this case the oiled silk should be long enough to encircle the limb, and the absorption of the salicylate of methyl which forms some 40 per cent of the oil produces almost as good result as if applied to the seat of pain. This method of treatment answers very well also in some cases of sciatica and, according to M. Siredey, in chronic rheumatic affections, where it may be used for a considerable time without any ill effects, either local or general. Here it acts better when applied directly to the affected joints than when the dressing is placed around the shaft of the bone. The strong smell of the oil is the only inconvenience. The same application has proved useful in relieving the lightning pains in a case of locomotor ataxia. The use of oil of wintergreen as an external application in chronic and sub-acute rheumatism is not anything novel, though the

particular method of its employment may perhaps be so. Mr. J. D. Staple, however, used it in the Stockport Infirmary several years ago as a liniment combined with an equal quantity of olive oil, and reported that in only two out of a hundred cases of chronic rheumatism did it fail to relieve the pain.

[We have also used ol. gautheria internally for this same distressing trouble, and with good results.—Ed.]

The Homeopathic Envoy.

I have found the following remedies a specific in the symptoms indicated:

Interstitial rheumatism, colocynth tinct., two-thirtieths of a drop every hour.

Sciatica, actea racem. tinct., four-thirtieths of a drop every hour.

Sebaceous tumors, as found on the eyelids, face, etc., sepia tinct., four-thirtieths of a drop every two hours.

A deep wine-colored nose, four-thirtieths of a drop of lycopodium tinct. every two hours.

Painful diarrhea, verat alb. tinct., one-thirtieth of a drop every hour.

Cystitis, cannabis sativa tinct., four thirtieths of a drop every hour.—C. A. Smith.

[Now, just sposen the interstitial rheumatism was a bryonia case, or a rhus case, or a sulphur case, what would become of the specific colocynth? Are we treating names, Bro. of the Envoy? And do we recommend specifics in Homeopathy?—Ed.]

The Medical Arena.

Believers in homeopathy pay over one-fourth of the taxes of the United States, therefore no discrimination should be practiced by the surgeon-general; only the ability of the applicant should count. The homeopaths were ready to serve their country when the President issued his first call for volunteers, but not one homeopathic surgeon was accepted because he had not had yellow fever. I ask the question: How many surgeons have we now in the United States that have had yellow fever? Very few; and if yellow fever should visit the camp of our soldiers, the homeopathic surgeon knows how to prescribe the right remedy. Statistics prove that homeopathic physicians, in a cholera epidemic in 1852, cured 90 per cent of their cholera patients; in fact, all epidemic fevers yield more readily to homeopathic treatment; for when the patient is already weak from the disease and the

nervous system is run down, large doses of drugs are certainly not indicated. Congress should not allow our surgeon general to discriminate between the different schools of medicine, but judge by the ability and standing of the applicant.—Neumeister.

[1. Msgr. Stout of St. Augustine could give a few additional statistics on how Homeopathy deals with yellow fever.

2. The only Army and Navy measure proposed in the Omaha meeting was laid on the table.—Ed.]

Scientific American.

Three days ago, one of our maids came to tell us that the cockroaches were streaming out of the houses in one of the streets of our village, marching in whole companies across the backyards and gardens toward the shores of the lake.

The village where we live consists of about four hundred cottages, mostly built of logs and thatched with straw. They are built on both sides of a street about two miles long and four hundred feet broad, in nests of four homesteads each, separated by cross streets some forty feet broad. The village is divided into two unequal halves by the gardens and courts surrounding our house, the house of another gentleman whose property adjoins ours, and by a large common or square, where the village church, schoolhouse and a few other buildings are situated. On the south the long line of homesteads is bordered by an open field; on the north, by the shores of a long, but shallow lake.

The strange migration of cockroaches that I have mentioned took place at about 11 a. m. on the 31st of May. These nocturnal insects infest the wooden cottages of our peasants in vast numbers, hiding in the chinks and crevices of the walls and ceilings or behind the large stoves, and sallying out at night in search of food.

Constant intimacy with these insects has made our peasants thoroughly acquainted with their habits, likes and dislikes, and they have come to put a faith in many of their observations that seems mere superstition to less habitual observers. Among these beliefs the most common is, that cockroaches have an infallible prescience of the immediate fortunes of the homestead they choose to inhabit. Any unusual activity in the cockroach colony, or a sudden reduction of their numbers, is interpreted as a certain sign of some impending

danger to the family or to the home. When, however, a general migration of cockroaches takes place—especially in the day time—our peasants have always understood it to portend nothing else than a destructive fire.

To-day, June 2d, at 4.30 p. m., we hurried out of our house at the cry that fire had broken out in the village, and the great bell of our church was tolling its rapid and violent appeal for help as I drove our fire-engine in the surgeon-general; only the ability of the the direction of a great column of black smoke ascending in the eastern end of our village. After a battle with the flames that lasted for about three hours, our four engines managed to arrest and control the conflagration; and as I write, the embers of more than thirty houses, barns and farmyards are yet sending lurid clouds of smoke and steam in the soft summer night. The cockroaches had left precisely those cottages that have just been destroyed, and are now enjoying the fruits of their foresight in other houses, many of the dwelling houses on my own estate being perfectly infested with them.

NICOLAS SHISHKOV, J. P.

Archangelskoe, near Simbirsk, Russia,
June 2, 1898.

The Medical Counselor.

Atlantic City was selected for the meeting next year, and from many western members came expressions that "the east is the place for the Institute meetings, as a rule, at least." Until the west is more populous, this is probably correct. The seashore is delightful, but it's a reflection on the esprit de corps of the Institute to insist that that alone will actuate members in going. It was very generally admitted at Omaha that a shorter, hustling session would be more satisfactory and more effective in every way than the present long, straggling, sparsely attended meeting. Open the session Tuesday morning, and close Saturday morning; hold business sessions twice a day, as in the past, and let three sections meet at once; devote evenings to entertainments; in short, "do business" systematically and expeditiously; get through and go home if we wish to; the result will be opening with everybody on the ground, greater numbers and enthusiasm, greater influence and prestige for the Institute, and closing with a climax instead of gradually petering out.

Those who wish can take an outing after adjournment, and where can more delightful

trips and interesting places be found than in the neighborhood of Atlantic City, particularly to the north, even to Quebec. Undoubtedly next meeting will be a "red-letter day" for the Institute, a repetition of that of 1891.—D. A. MacLachlan, M.D.

Charlotte Medical Journal.

EDUCATING THE LAITY.—We are often amazed at the profound ignorance of medical science manifested by the laity. This ignorance is not limited to the illiterate, for we meet with men among the highly educated classes, teachers, ministers and lawyers, who appear more attracted toward voodooism than to our noble science. If reason places an idea in the mind, reason can remove it and supplant it by another. But there is no known method of displacing an opinion that has been acquired without reason. Many of us older members of the profession can with some degree of amusement recall our efforts made to educate the laity when we were young and ambitious. During my first year's practice, I was called to a case of membranous croup. The child died. On the following day a neighbor called at my office. He was a rich farmer and stock raiser, apparently above the average in intellect. He said, "Well, Doc, you lost a case in our neighborhood yesterday; we have had lots of croup in our family; we always use goose grease for croup. My wife was very anxious to see you, and tell you about this remedy, as she has had more experience with the disease than you have had." I told him that the croup that had afflicted his children was probably catarrhal or spasmodical croup. It then occurred to me that this was a propitious opportunity to educate him, to overwhelm him with information. With a pencil I made a drawing of the trachea with colored crayon, drew the false membrane left merely sufficient space for the passage of a small quantity of air, explained the manner of death in fatal cases, and manner of separation and expulsion of the membrane in favorable cases, and the mortality statistics. I entertained him in this manner for more than an hour, when being satisfied that he then knew all about croup I ceased talking. Imagine my chagrin, when after a moment's silence he said: "Well, Doc, if you ever have another case of this kind, try goose grease. I believe that it will fetch it." Soon after this occurrence I was called to attend a child in convulsions. Several women of the neighborhood were there. After the child had been quieted, the mother asked, "Doctor, was that a worm fit?" I answered that I thought

not, that the children could not have worms, unless worm eggs had entered the alimentary canal, and forgetful of my recent failure in my attempt to instruct the farmer, I launched out on a long lecture on the propagation and evolution of different kinds of worms that infest the body. When I had concluded they all looked sulky. Soon afterward I heard from those women. They spread the word throughout the neighborhood: "That young doctor hasn't got a lick of sense; he thinks that worms lay eggs like hens." In these two efforts to teach the laity my pupils learned nothing. But I learned a lasting lesson. Since then I have drawn no more diagrams, nor contradicted the mother who believes her child infected with worms.

Client's Law Journal.

THE DOCTORS.—An examination of a large number of account books of members of the medical profession, introduced as evidence in actions brought to recover for professional services rendered, has shown a great variety of methods in the keeping of these accounts. The busy physician, evidently, as a rule, gives but little thought or time to his account books, and if he gets into court often finds himself at a disadvantage by reason of the condition of the account upon which he sues. He has no thought at the time the services are rendered that he will have to bring suit to recover his charges for them. In fact, it is with reluctance, generally as a last resort, that he goes into court. But there are people who will never pay for medical services, or anything else, unless compelled to do so; and others who are not willing to pay what the services are reasonably worth. Then, too, patients sometimes die. In case of the death of a patient the bill for services must, in general, be collected through the administrator or executor of the decedent's estate. The administrator, perhaps, not being familiar with the facts, or considering the charges too high, or for some other reason, may feel it his duty to reject the claim, and let the court pass upon its validity. In such a case the physician is compelled to resort to the court or lose his claim. Having brought suit, he cannot testify in his own behalf as to matters that transpired before the death of the decedent, except that, if his charges are in the form of an account, he may produce his account book and testify to a limited extent in reference thereto. (See article on "Important Rules of Evidence"). This rule in regard to evidence shows how necessary it is that the books of account of physicians

should be kept in good form, as in the natural course of events many accounts of this nature must be collected from estates. Lack of space prevents entering upon any discussion of particular forms of keeping accounts, but it may be remarked that regular daily entries of all transactions with patients, together with the charge for the service rendered, is advisable. If the way of keeping the books is such that the entries could have been made at any time, or they are a system of marks and hieroglyphics which must be explained by the person who made them, or there is nothing to show when the entries were made, except the testimony of the physician; or it appears that the amounts were put down long after the services were rendered, it detracts from the value of the book as evidence and may render it wholly inadmissible as such. Each item with the charge therefor should be entered in the book on the day on which the service was rendered, or not later than the next day, and the nature of the service should be briefly indicated. The charge should indicate whether it is for a visit to the patient, or a call by the patient at the office; and if some special service is rendered for which additional charge is made, the nature of the special service should be indicated. These explanatory entries may be so brief as to require but little space, but should be such as to explain themselves. A physician's claim for services rendered to a person during his last sickness is, together with the funeral expenses and costs of administration, a preferred claim against the decedent's estate. It is prior to the year's allowance to the widow.

The Minneapolis Homeopathic Magazine.

MINNESOTA'S MEDICAL LICENSE LAW.—At the recent Omaha meeting of the American Institute the statement was made, and it has since appeared in several of our journals, "that the Medical License Law of Minnesota had been knocked out by a recent decision of one of the district courts of the state."

The case is this—"a so called Dr., La-Chance by name, a "Divine Healer," was arrested for practicing without a license—the court held that inasmuch as he prescribed no medicine, gave no advice, and did nothing but take the money of the patients and let the latter believe that he and God would cure them, he, LaChance, was not amenable to the law, and consequently the case went against the prosecution. The supreme court sustains the finding of the lower court.

We, editorially and individually, believe the

law to be unconstitutional, and have good legal opinion to sustain our belief. But no physician of good standing has yet been found who had backbone enough to make a fight against the law, so it remains on our statute books a bugaboo and a bogieman to frighten away practitioners who would like to come to the state. For it does frighten men away. Many a good man well versed in medicine has told us personally that he would not come to Minnesota and run the risk of being turned down by an examining board. A needless fear, for we know that any medical man of average intelligence could and would pass the examination.

This is respectfully submitted to Brer. Kraft for his perusal, also to C. E. Fisher of the Century.

[Thanks. Brer. Kraft has taken due notice, and will govern himself accordingly.]

Southern California Practitioner.

For many years he [Dr. Championniere] did his work at the St. Louis in a couple of old wooden pavilions with wooden floors, where all the surroundings would appear to be unfavorable. He is now at the Bonjon and does his abdominal work in an isolated brick pavilion the inside of which, from an aseptic point of view, seems to be perfect.

I remarked to him: "You can do better work here and have better results than you could at your old quarters in St. Louis." He replied: "On the contrary, my results have never been as good here as they were at my old home. Surroundings play no role in this matter. This thing of having everyone who witnesses an abdominal operation put on an outside sterilized garment is all a fad. If the dirt and microbes do not touch my patient, the instruments or the dressings, I do not fear them. My results are not as good as at the St. Louis, because I have not been able to organize my help here as well as I had at my old stand."—J. A. M. A.

New York Medical Journal.

The Lancet for June 25th quotes from the Times an item concerning John Hamilton of Bedford avenue, Tottenham Court road, who appeared on June 17th before a magistrate in answer to two summonses charging him with falsely pretending to and using the title of doctor of medicine, he being an unregistered practitioner. A medical student gave evidence that he visited the defendant at the address given and paid him two guineas for medicine.

There was a brass plate on the door with the name "John Hamilton, M.D., New York." It was argued on decided cases that the fact that the defendant held a diploma granted in another country did not entitle him to practice as an M.D. in England, but the defendant had never described himself as other than he was, and it was pointed out that two previous prosecutions against him had failed. The magistrate dismissed the summons, saying that there was no evidence to show that the defendant had used this title with intent to deceive and allowing the defense £3 3s. costs.

[It begins to look as if an honest American diploma will have to be recognized by the Allopathic General Medical Council before many generations have passed into innocuous desuetude.]

The Clinique.

A Leaf From a Sharp Lexicon.—A jolly correspondent quotes the following definitions:

Christian Science—Suggestion plus absurdity.

Divine Healing—Suggestion plus faith in God's mercy.

Osteopathy—Suggestion plus massage.

Hydrotherapy—Suggestion plus water.

Metaphysical Healing—Suggestion plus fog.

Hypnotism—Suggestion plus sleep.

Spiritualism is somnambulism, and

Theosophy is an intellectual pleasantry.

Massachusetts Medical Journal.

"It seems to us passing strange that so many persons, otherwise seemingly sensible, can be so deluded by what is called Christian science. But that is their affair and not ours. We only referred to this matter to repeat what impressed us as a very funny story, for it is a part of our religion to never lose a good story. A man of the Christian science faith fractured his femur. Under Christian science it united, of course, but, of course, there was considerable shortening. Some months later a lady called at his place of business to sell him a book. In the course of conversation he related his experience, bemoaning the fact that the one-time injured limb was so short that he walked with much difficulty. She expressed much sympathy, but assured him that just as Christian science had mended the bone, just so it could lengthen it. She informed him she understood and could give him one treatment

then, and after that give him what were called 'absent treatments.' This she did, and departed. A fortnight later the man believed his leg really was a little longer. After another week he was sure that it was. A week later it was still longer, and soon afterward it was as long as the other, and later still it was longer than the uninjured limb. At last accounts the leg was getting too long; the 'absent treatment' was still going on, and the whereabouts of the woman could not be ascertained."

[And one of his legs was longer than it really ought to be.]

The Medical Arena.

We think the establishment of a "headquarters" a mistake. If any place need be so styled it should be the meeting place of the Institute, and not a second, or third-class, or even a really first-class hotel. The dingy and uninviting place at Omaha designated as "headquarters" was an insult to the Institute, a vile place in which an attempt was made to place members in steerage because of the Institute's recommendation impliedly put upon the place. Hereafter there should be no "headquarters" of this sort, or a job will be suspected and the management of the Institute will fall into disrepute; nor should a really first-class hotel be so designated and thus work an injustice to other hostelryes equally good and compel a prospective member who is sensitive about such matters and short of cash to stay away from the Institute. The Institute is not the body to establish and foster such invidious distinctions.

[Referring to the hotel, we would like to say that all those who came with us at our hotel were well served. Folks who go to a "headquarters" hotel must expect to pay additional for the privileges.—Editor.]

New York Medical Journal.

THE CIGARETTE QUESTION.—The actual facts are: Tobacco is harmful to most neurotics, though even among these we have known a few exceptions, to whom, when used in moderation, it seems decidedly beneficial; it is harmful in certain cases of cardiac affections; it affects the sight injuriously in some few people, and the throat, producing follicular pharyngitis, in others. These people should not use it. Used to excess it is bad for every one, as is everything else, even such wholesome things as bread or water. What constitutes excess is an individual question to be

determined for each person either of himself or with the advice of his physician. Cigarette smoking is not of itself more harmful than any other form, but is subject to the above-mentioned general law-facts. It has, however, two special dangers: 1. The smallness of the cigarette and its convenience may perhaps induce inordinate use; but that, as we have said, is a question for the individual, not the public. 2. The injurious practice of inhaling the smoke is more likely to take place with the mild cigarette than with the stronger pipe or cigar. That again is a question for the individual. The asserted increase of cigarette smoking among boys, if true, is an evil, for people of immature age, as well as those of impaired constitution noted above, ought not to smoke at all. But, for the reasons already mentioned, that is no argument for the prohibition of the proper use of the cigarette or any other form of tobacco by the world at large.

Medical Brief.

ORIGIN OF TUBERCULOSIS.—A recent writer on consumption says: "Tuberculosis comes from without through the food and the air." This senseless reiteration of the germ theory of infection hinders the consummation of true, preventive means. Consumption comes from within. It is the result of an abnormally sensitive nervous organization, unfavorable environment, poor sanitation and hygiene, and anemia. Consumption begins in the alimentary canal, as a digestive disturbance; it penetrates to the blood, filling it with poisonous products, destroying the red corpuscles, and lessening its nutritive power; it extends to the nervous system, increasing its natural irritability, and depriving it of proper nourishment. Some trifling exposure in bad weather readily overpowers such a hypersensitive nervous system, causing a pulmonary congestion which the system is unable to throw off, because of the long previous drain on its vitality. The constant congestion in the lungs leads to the formation of tubercular tissue—which is nothing but rudimentary lymphoid structure, having no permanent function, poorly organized, and having no nervous supply, therefore, prone to degeneration. The infection of this tubercular tissue with bacilli comes after its formation, and is not the cause of it. This is shown by the fact that the sputum of consumptives sometimes contains bacilli, and sometimes it does not. Moreover, where consumptives are intelligently treated they are

often cured, even after the disease has wrought considerable havoc. If the germs were the cause, their action would be persistent and continuous.

The prevention of consumption lies not in legislative restrictions, or segregation, but in educating people to comprehend the importance of consulting a physician at the first symptom of ill health, and in diffusing a practical knowledge of climatology, hygiene and sanitation. A year of chronic indigestion will so depreciate any system that it will require months of professional supervision to put the individual in anything like a normal condition. Whenever you meet with such a case look for a remedy which will stimulate the normal activity of the digestive organs. A healthy stomach is the source of life, a diseased one is the prime cause of consumption and allied nutrition diseases.



RHINOLITH, OR NASAL CALCULUS.

WM. M. POOLE, M.D.,
Detroit, Mich.

The pathological specimen here exhibited is one of unusual interest, even to those who limit their practice to diseases of the eye, ear, nose, and throat, from the infrequency with which we meet these cases, and also from the circumstances which led up to its discovery, owing to the fact that it was situated somewhat differently from most cases of this kind.

Miss L. K., aged twenty-four years, from whose nose this was taken, consulted me Jan. 1, 1898, regarding her nasal catarrh, with which she stated she had been afflicted ever since her childhood. Ten years ago she had been treated for about a year by one of the leading rhinologists of this city, receiving considerable benefit, but for the last two or three years she has had a rather profuse nasal discharge, thickened, and increasingly offensive in character, with obstruction to nasal respiration, loss of smell, nasal voice, and the other usual symptoms which we find in an aggravated case of chronic rhinitis. Lately she had suffered from headache, which was increasing in severity, and was also troubled with weeping of the left eye. She had been using an atomizer for some years without getting any other relief than the keeping of the nose approximately clean.

On making anterior and posterior rhinoscopic examination I found considerable hypertrophy of the turbinates of the left side, especially of the inferior turbinal.

I suggested an operation for the removal of the hypertrophied tissue of the lower turbinal, which was impinging on the floor of the nose. This was agreed upon, and on Saturday, January 15th, I operated at 3 p. m. in the usual way, cocaineizing the parts thoroughly and making a practically painless operation.

Hemorrhage was not very profuse and was readily controlled at this time. The patient returned home, and soon after suffered from an attack of nervous sick headache, to which she was subject upon occasions of nervous strain.

As usual, the headache ended with an attack of retching, after which straining the hemorrhage started in afresh and rather profusely. I tried again to control it with styptics and plugging the naris with absorbent cotton, but did not succeed in thoroughly arresting



This cut is an illustration of the rhinolith, natural size.

the flow of blood, and, as the patient was getting very weak, with the kind assistance of Dr. Suttie, I tamponed through the posterior naris with a sponge tent, which instantly stopped the hemorrhage. I then ordered her to be liberally supplied with beef extract, for the double purpose of nourishment and to increase the arterial tension.

Sunday, the next day, she was doing nicely, but was very weak; there was no recurrence of the hemorrhage, but I did not think it advisable to remove the tampon as she was too anæsthetic. I anesthetized the patient, and weak to hear it.

Monday, January 17th, the patient was a little stronger, but owing to debility I could only remove a part of the tampon from the anterior naris.

The next two days I removed still more of

the sponge anteriorly, in all about two-thirds of it being removed up to this time, the patient still being too weak to bear much manipulation.

On Thursday morning, January 20th, I attempted to remove the remainder posteriorly, but found it so firmly fixed that it could not be dislodged except with extreme force under with considerable difficulty removed the remainder of the sponge.

After the patient recovered from the anæsthetic I cleansed the nasal cavity thoroughly with hydrozone, one part to twelve parts of lukewarm water, and she returned home rejoicing, the turbinal wound being in good condition, healing nicely.

Next morning she came to my office for treatment and stated she had enjoyed perfect freedom in breathing through that nostril until about four o'clock in the morning, when, changing her position in bed, that side became suddenly obstructed. After cleansing the nostril, which was seemingly full of an offensive discharge, I discovered this body, which was attached at the posterior end on the outer side of the inferior meatus, lying, as it were, in a groove or pocket.

The anterior or loose end of it was sharp like a spiculum of bone, and black in color; it was freely movable about its long axis, so that you could pass a cotton holder around it and lift it from its bed. After cocaineizing, I grasped it with a dressing forceps and, giving it a twist, removed it. I then thoroughly cleansed and disinfected the cavity with the hydrozone solution, which removed the odor and rendered the cavity wholesome.

The next day the two smaller pieces were removed while cleansing and treating the nose. They were loose and seemed as though they had just sealed off from the bed where the larger piece had lain.

The spraying of the nasal cavity with hydrozone, followed by the use of glycozone, constituted the treatment for the next four days, by which time the offensive odor had entirely disappeared, and the parts had assumed a healthy condition.

This concretion formed on the outer side of the inferior meatus, and as it grew larger it obstructed the flow of tears through the nasolachrymal canal, as evidenced by the overflow of tears from the left eye, which condition ceased immediately after removal of the rhinolith.

The secondary hemorrhage was evidently due to a relaxation of the pressure on the vessels of the turbinate, owing to the calculus

being disturbed in its position when the patient was retching.

As to the exciting cause of the formation in the case of this young lady, I could get only a negative history, there being no recollection of any foreign object having been put up the nose in her childhood. Being desirous of ascertaining, if possible, what served as a nucleus, and at the same time of finding out the composition of the formation, I cut it in two.

Microscopical examination reveals that it is composed of amorphous phosphates, undoubtedly the phosphates of calcium and sodium, which came from the tears.

There has been a marked improvement in the young lady's condition since the removal of the rhinolith; overflowing of the tears in the left eye has ceased, nasal respiration has become perfect, her voice has lost the nasal twang, and her general health has improved rapidly, as indicated by the fact that she has gained four pounds in weight since the operation (four weeks ago), and is still improving.

Book Reviews.

The Century for August is very interesting in that it has several up-to-date war papers. One of these is "An Artist with Sampson's Fleet"; another is "Life in Manila"; still another "Facts about the Philippines"; another "The Island of Porto Rico"; and, finally, "The Battle of Manila Bay" described by eye-witnesses. All these papers are of superior merit and are beautifully illustrated. The battle of Manila is described in an every-day style of composition, just as any one of our readers, not an author, would tell it. One of these eye-witnesses makes his memoranda during the progress of the battle. It is by all odds the best description we have so far read. It is very meet and proper at this time to know something about the Philippines and Porto Rico; and the Century gives the information clear and brief without that unfortunate political or sensational tang so much the fault of the daily press. "The Seven Wonders of the World" and "The Coon Dog," both well pictured, are other desirable features of the August number. There isn't a tiresome page in it.

St. Nicholas for August opens with a delightful little sketch entitled "Margery and the Captain," by Anna A. Rogers, which is very charming. The "Lakerim Athletic Club" is

still interesting. "The Highwayman of Durdley," done in poetry, is witty and well told. The nearest St. Nicholas comes to war topics is a paper on "Big Guns and Armor of Our Navy." "The Endless Story" will interest and charm almost any aged reader. A touch of the plaintive comes with "Long Comes 'Liza with the Broom." The Riddle-Box is full of catchy things.

Correspondence.

THE AMERICAN HOMEOPATHIST: In the journal *Le Medecin*, of Brussels, of the 12th inst., quoting the *Journal de Medecin*, of Paris, is given an account of a policeman having been badly bitten by a mad dog. The next day he went to the Pasteur Institute, where he was treated for eighteen days, during all which time he rigorously followed the prescribed treatment and was discharged cured! "Last week," says the *Paris Medical Journal*, "he felt certain pains, which excited the suspicions of the doctor whom he consulted. The gentleman telephoned to the director of the Pasteur Institute, who replied that the trouble must be owing to some other cause than hydrophobia, because he had left their Institute completely cured. At the end of two or three days there was no longer any room for doubt; the case was clearly one of hydrophobia. He was taken to the hospital, where he died last Sunday morning in frightful convulsions." This case is pretty certain to figure in the annals of the Pasteur Institute as a cure.

Yours respectfully,

MONTAGUE R. LEVERSON.

FORT HAMILTON, N. Y., June 24, 1898.

Globules.

The Missouri Homeopathic Medical College (St. Louis) is the first upon our table with a new and very neat announcement. When that amphitheatre and hospital are completed there will be occasion for much rejoicing.

The Philadelphia Evening Star of the 2d of August contains a well-written article on "The Klondike and Alaska: Its Present Condition and Future," by Dr. Bushrod W. James. It is needless to tell those who know Dr. James' felicity with the pen, and who have followed him through his Alaskan, and his

later book on Alaska, that this letter is a statement of the truth about Alaska in its most concise and yet intelligent form. Dr. James never writes a prosy paper.

It is said that Dr. Cowperthwaite of Chicago was lying very ill with what was pronounced appendicitis. But he steadfastly refused to be operated on, and so he is again about and getting well. That's right, A. C., we can't spare you for a number of years yet to come. Think, too, how cold and cheerless it would be, even in a hot church on a Sunday night, if your memory was dished up in a pretended Memorial Service in the Institute with the Institute reverently engaged elsewhere electioneering for the forthcoming day's President. So, we ask that you continue to live a while longer and come to the Institute and wake up that Memorial Service.

Dr. J. B. S. King, whose funny pen has been silent for several years, has been made Registrar of Hering College. Good man for a good college.

The following are the officers and censors elected by the American O., O. & L. Society: President, Dr. E. J. Bissell, Rochester, N. Y.; First Vice-President, Dr. E. W. Beebe, Milwaukee, Wis.; Second Vice-President, Dr. C. Gurnee Fellows, Chicago, Ill.; Secretary, Dr. H. D. Schenck, Brooklyn, N. Y.; Treasurer, Dr. Charles H. Hellrich, New York; Board of Censors, Drs. E. B. Hooker, Hartford, Conn.; D. A. MacLachlan, Detroit, Mich.; Geo. B. Rice, Boston; Thomas Stewart, Cincinnati; and Isaac C. Soule, Freeport, Ill.

The Southern Homeopathic Medical Association will hold its next annual meeting at Birmingham, Ala., in November. Dr. Lizzie Gray Gutherz, as our readers well know, is president and a first-class wide-awake and real homeopathic meeting may be expected. Put your house in order if you can and attend the same meeting.

The college address made by the Rev. J. Stewart Smith to the graduating class of the Kansas City Homeopathic College is of such sterling value, and so out of the common that we take pleasure in re-narrating the college upon having secured so excellent and eloquent a speaker for the occasion. The Rev. Stewart Smith knows Hahnemann and homeopathy as well, we think, as 75 per cent of

the profession of homeopathic medicine do to-day. His references to our homeopathic Master were not culled from Bradiord's Life. He speaks like one who knows. Therefore, he did not, like another clergyman, advise the class not to tie themselves to the exploded notions of a hundred years ago. Put the Rev. Stewart-Smith's address in pamphlet form and send it out as a missionary document.

Dr. Thomas Minahan, who was one of our particularly bright materia medica students at Cleveland, was one of twenty-three out of a total of fifty-eight who took the Pennsylvania examination and passed. Dr. Minahan was a faithful and industrious student and stood well in his finals. He will make a first-class, all-around physician. He is located at 95 Beltzhoover avenue, Pittsburg, Pa.

Don't hug the delusion that fever in any degree is a benefit to the patient.

Dr. Francis B. Kellogg of Los Angeles, in a valuable paper in Dr. Norton's eye and ear journal, contributes the information that a very serviceable ear-drum can be made of a bit of cotton saturated in water and placed tightly against the ear-drum.

The following "Declaration of Principles" was adopted at the organization of Dunham Medical College, and is still in force:

"The great object of this institution shall be the education of the student in the science and art of medicine and surgery in accordance with the doctrines promulgated by Samuel Hahnemann in his *Organon of the Art of Healing* and the *Chronic Diseases*; the Therapeutic belief and practice of each and every member of the Faculty shall be expressed in the formula *'Similia Similibus Curantur'*; no palliative treatment or repressive measures will be advocated or employed in any of the lectures or clinics of this College; Surgery has its legitimate sphere of action for the meeting of strictly mechanical conditions."

[That reads well, and, what is more to the point, homeopathically. And yet this college was not—I put no matter!]

The American Homeopathist.

ISSUED TWICE A MONTH. This journal is published for its subscribers only, and has no free list. Sample copies are never sent. Subscriptions are not discontinued until so ordered.

A. L. CHATTERTON & CO., Publishers, New York.

The American Homeopathist.

NEW YORK, SEPTEMBER 15, 1898.

FRANK KRAFT, M.D., CLEVELAND, OHIO, EDITOR.

OUR PORTRAITS.



E. H. WILSEY, M.D.,
Parkersburg, W. Va.

The coroner of Cleveland was well of a Wednesday and dead of a Sunday. Appendicitis. Appendectomy. A hale and hearty man. The very picture of robust health and vigor. Said the complacent operators: "If he had had the operation done a year ago he would be alive to-day. But it was too late now. The appendix rotten through and through." Of course. Certainly! Cowper-

thwaite was too cute for 'em. And he lives to tell the tale. On with the Knife! It is so much easier to cut than to cure! Any man who, like Terry, of New York, says that appendicitis is curable with sweet oil or any other kind of oil, or anything else but a sharp knife is a—well, no matter. It can't be done. Pile up the records! Keep on piling them up. Let us kill a few more public men and then a sudden halt will be called.

It is possible to so teach a certain well-known series of homeopathic remedies with chalk and crayon and moist colors (water or oil) that every member of the class will be glad to attend that Professor's hour, and, being interested, will be instructed. What we see makes a deeper and more lasting impression than what we hear. Some of Shelton's lectures partake of this thought; therefore it is practical.

Men and brethren down in the country, who in reality conduct the "preparatory schools," and are the feeders of the medical college up in the city, don't let your student go to a college that is not truly homeopathic, if you want to make a homeopath of him. Don't be misled by the blue-and-gold Announcement with its long list of unknown men for professors, and its glittering tables of operations done. Send your boy where he will be made a HOMEOPATH and surgeon, not a SURGEON and homeopath.

What will the harvest be this fall in the medical colleges? Will the preceptors still send their students to the nearest college irrespective of the facilities of the faculty as men and workmen and whether the college teaches homeopathy or any old thing? Look out, Preceptors!

THE BATTLE OF THE ANNOUNCEMENTS.

Not a real battle, of course, one requiring blood and treasure, and sons of their fathers; but a commercial battle—a Pickwickian battle—a desperate albeit courteous effort of the one college to out-teach and out-preach and out-reach all the others. When this editor looks over the number of green-and-gold announcements littering his writing table, representing all the colleges of the United States, and compares their business statements and promises the one with the other, he cannot but marvel that he and a few other old-style general practitioners in this country are still numbered among the non-wealthy class. The opportunities to become suddenly well-to-do; the chances of having an easy livelihood assured to them—those modern medical men—in Ohio, for one place, and Minnesota for another, are so many, according to the veracious chronicler of the College Announcement, that it is really wonderful that young men do not on the instant leave the plow tail, the carpenter's bench, the anvil, the motor-car, and beg, borrow or steal sufficient of means to graduate in the nearest medical school; and so be at once wafted from a plane of hard and arduous sweat-stained labor to the sweet, easy-taking, coupon-cutting life of a medical doctor.

We are not alone, doubtless, in having discovered that the advertisements in many of the newspapers—nay, even in some of our medical exchanges—are far better written and illustrated and presented than the strictly ethical editorial, or ordinary news matter. If one but stops to read, between mouthfuls of his Pettijohn and Postum-Cereal any one of those mothersome appeals of that dear saint-like, crimped hair and folded kerchief Lydia Pinkham to her down-trodden sisters; or notes with moistened eye and nut-brown taste the eloquent essays of the Golden-Medical-Discovery-people to the poor overworked clerks, for ladies, typewriters, sewing girls and passe society women, all broken up or down; or follows for a quarter page or more the thankful clergymen's recommendations of this or that nerve tonic which under Providence gave them renewed "ambition"—if one has but the time and inclination to read these well-worded and illustrated advertisements, it will dawn upon him that they are well done and calculated to do their very effect.

Without intending any invidious comparisons we are moved to say, after reading some of the College Announcements, that this same Truthful James and proficient adsmith has got in his fine Italian hand in some of the announcements and that he is bent upon filling his patrons' dusty benches whether or no. Thus we learn that the profession is not overcrowded; that there is lots of room; that there are only 'steen hundred per cent of doctors to every thousand of population; that the rate of increase is a certain fixed per cent of babies, and an equally well-fixed per cent of deaths; so that it is very evident that the population is increasing—notwithstanding the present medical profession—and there is lots and lots of room for all—at the top. The price of board is still so very, very cheap in all these college cities; in some places one can get good room and board and Christian conversation for from \$1.72 up to \$3.99 per week; of course if two or more club together, and do not club each other later on, it can be had much cheaper, depending somewhat on how little one eats. Then there are the Y. M. C. A. and Salvation Army and church associations which have given our college (because of our specially holyfied Christian professors—professors of medicine by the grace of the self-electing faculty) extra ground-floor, privileges and facilities for family and table worship. The street cars all run right by our front door, and stop when hailed. The Entrance Examination looks a little formidable to the would-be matriculate, but he soon learns, by way of the underground railway, that THAT is a mere make-believe with some of the schools, and more observed in the breach than in the observance. Let him but appear at the left-hand window of such school with his dexter digit encircling a one hundred dollar bill of the realm, and it is ten to one-half of one per cent that he will not have to lie awake many nights conning Latin verbs or digging Greek roots, or be planolplied o'er with a high-school teacher's certificate of efficiency and proficiency.

But that was not wholly what moved us to take up our typewriter this beautiful morning to dash off these few lines, hoping they would find you the same. It was concerning that other something which the schools seem to promise so high and holy to do for every applicant; namely, give him a medical education such as no other of the confederated colleges can give. Our college possesses so many unusual and extraordinary advantages—not so

much in the certainty of graduating the student, nor of Christian and moral surroundings, but in the making such a doctor of him that neither Chicago, Cleveland, Philadelphia, Baltimore nor Denver can by dint of much rainbow advertisement or other influences take our students from us! For instance, take the homeopathic colleges. One of these colleges whose Announcement lies before us gives the names of six dozen men as composing its faculty. Yet in that glittering array of notables there is not ONE man who has been noted for anything special in the way of homeopathic materia medica as Hahnemann taught it! Not ONE man in that catalogue could tell why Bell. 30 is better than the tincture or how homeopathic medicine should be practiced! Ah, yes, when we reach the departments of Surgery and Gynecology then we have giants, and members of the American Institute of Homeopathy! Contributors to our literature, bookmakers and history-makers. Their names are well known. But, think a moment and say if this is not equally true of Jefferson College of Philadelphia, or Rush of Chicago, or The Missouri Medical of St. Louis, or The Johns Hopkins of Baltimore, and a half hundred more or less of famous old school medical schools here and abroad. Why send our student to the homeopathic school? That is what caused us to murmur as we saw the long lists of professors given in the many homeopathic rosters, and weighed their homeopathic knowledge and standing with that knowledge which every well-posted medical editor has of every prominent man and woman in his school.

Is it still considered true that anybody can teach materia medica in a homeopathic school, if he but read from Farrington or skillfully adapts a few striking lines from Hering or Jahr or the Allens to his mass of letter-perfect manuscript? Out upon such a doctrine! That is why Homeopathy is being buried and lost in the mass of surgery and gynecology and allopathy! That is why the student, unless he is well grounded in Homeopathy before he darkens the door of the HOMEOPATHIC school, is so apt to fall away from what he never knew, and was never taught from a rostrum that knows naught of Homeopathy. That is why there has been a Macedonian cry for Revision. Revision, Revision! But the Revision is not in the Materia Medica. It is in the faculty! It is a Revision which insists that the materia medica teacher shall

know as much of materia medica as Wood knows of Gynecology, or Helmuth of Surgery, or Norton of Ophthalmology. It is a Revision which means that the student shall be TAUGHT HOMEOPATHY as well as materia medica. For materia medica is no more Homeopathy than cat-gut is surgery, or cotton eardrums is otology. Where are we teaching true Homeopathy in this broad land of ours? Oh, yes, every faculty man reading this paper will instantly fly to arms and avow that his college teaches not only gynecology and eyes and ears and that last inch, but also Homeopathy; that here again the splenetic AMERICAN HOMEOPATHIST is maliciously slandering the homeopathic colleges. All right, gentlemen, you who take the name and fame of your college for granted because you do not have a perceptible falling off in the class from year to year and have no very unruly class as a rule, no dissent from the routine teaching except an occasional murmur which is quickly silenced with a Homeric frown, but please step into your faculty room, when you are not expected, and listen to the professor of Homeopathic Therapeutics and Organon teaching the true Homeopathy of Hahnemann. Sir, the chances are overwhelmingly that you haven't any such chair in your faculty; that your faculty deems its course well run, its laurels won, its duty done to its friends and patrons and alumni when it permits a half dozen gentlemanly and dignified professors to read in a full round voice a few pages of remedies once or twice or thrice a week; and, at the end of the final semester, puts four or five questions in the examination paper on What Is Homeopathy, and What Is the Organon good for besides Gathering dust on the Top of the Library, or Pressing autumn leaves in? Is this teaching Homeopathy?

You gentlemen down in the country who are training your young man or woman to be sent up presently to the nearest homeopathic school to be finished off as a homeopathic doctor, you don't know what you do when you fail to investigate the college, when you permit yourself to be honeyfugled and bamboozled by this cleverly written College Announcement, and possibly a more cleverly written personal letter, from the Registrar of

*It is admitted that there are many of these most excellent schools; but, on the other hand, there are also those who are not teaching Homeopathy, and the weakest link is the strength of the chain, and it is to these that attention is called.

the College, who has learned through a system of addition, multiplication and silence, that you have a son or a student grooming for the profession. Don't let the Lydia Pinkham writers of the College Announcements draw the wool over your eyes clear down to your ensiform! Examine the college as well as the blue-and-gold prospectus. You can do your student no greater harm than to start him wrong. You admit that. If you want to make a homeopath of him send him to a homeopathic school. If you want to make a great surgeon or a greater gynecologist of him, with no thought of homeopathy, what is the use of having him taught second hand; why not go at once to the fountain head—the allopathic school? Then when he gets his diploma, he will not have to be always ashamed of the word Homeopathy which disfigures it when he wants to mingle with other surgeons and gynecologists, or membership with British or other foreign gynecological societies.

Oh, men and women, followers of Hahnemann; you who learned the old and veritable Homeopathy as your preceptors got it from men who sat very near the feet of the Master, will you make no effort to save the Homeopathy of your Fathers? Will you sit idly by while many of the modern hermaphroditic colleges thrust homeopathy from their boards or dally with it as an antiquated notion, hanging the hat the while to catch every new breeze in chemistry and microscopy? Will you not examine the school before you send your son or your daughter or student to be ruined for life—because he will return to you neither homeopath nor allopath? Strike at the faculty of your schools and there will soon be no longer much need for this insistent clamor for a Revision of the Homeopathic Materia Medica. Let the Boards of Visitors, and Boards of Censors lay aside their tinsel crowns for the nonce and really visit and examine the schools and tell the profession if Homeopathy is being taught, or whether it is simply read off in a few deadly, monotonous materia medica lectures of a generation's mildewing. That is not homeopathy! That is allopathy diluted! Grind that into your souls, gentlemen of the modern homeopathic college. The time is at hand for a change. Homeopathy is or it is not. If it is, then let it appear in all its pristine glory. If it is not, why, look you, take the silly thing out of the title, and let us call ourselves Eclectics, with no intended offense to the Eclectics.

ENGLISH FELICITATIONS.

After reading the leading editorial of the August (London) Homeopathic Review we very much fear that our former peaceful Transatlantic homeopathic brethren are really becoming awake to the needs of the hour and will ere long refuse to be coddled any longer by the allopathic school. If this same striking from the shoulder should continue it will ultimately bring homeopathy out of the background and make it a prime and prominent English issue. Heaven speed that day! There is much spirit in the article referred to. It is almost American in its use of the impersonal personality. It is all about Dr. John H. Clarke's paper on the "Doctrine of Signatures," which he read before the annual Homeopathic Congress, and which at that time caused so many, nay, the majority, of the congress assembled to forget itself and seek to heap ridicule not only on the paper, but also on its author. But this is the way the "brutal majority" has of doing whether in England or America. This editorial makes a direct personal onslaught on Dr. Clarke and charges him with all manner of unpleasant and unhomeopathic things. The animus of the thing probably lies in the fact that Dr. Clarke is editor of the (London) Homeopathic World, which is the only hated rival of the Review. It is possibly also based on the fact that Dr. Clarke is distinctly the leader of a very large and influential branch of the English school, and one which is not wrapped up in over-contemplation of its own omphales all the day long and half the night. The statistical editor is turned loose on Dr. Clarke's article; and as statistics are never doctored, and, therefore, cannot lie, we must assume that there is nothing in the "Doctrine of Signatures." Still what a mountain to have made of a mole hill! Dr. Clarke did not say that the "Doctrine of Signatures" was Homeopathy; he was careful to lay his foundation and then proceed with his argument, of the possible use of the "Doctrine of Signatures" in the selection of the homeopathic remedy. And any man who can give any extra aid to the honest homeopathic workman so as to help him select his remedy, the more easily is entitled to thanks and much honor. We read the paper on its first publication and were so taken back with its clearness and value that we had it reprinted in these pages from which our readers have seen the causelessness of the charge of unhomeopathic measures charged against editor and Brer.

Clarke. We have been commissioned to defend Dr. Clarke and shall not attempt it; for we feel perfectly confident that he will be able to take care of himself in good order. He will probably now feel empowered to criticize something more than the presence of ladies, and the cut-and-dried speeches at the Congress banquet. But he will drink fair, Betsy, he'll drink fair! Here's luck to you, Brother!



PULTE MEDICAL COLLEGE.

It gives us much pleasure to call the attention of our readers to one of our most progressive and truly homeopathic colleges. We refer, of course, to Pulte of Cincinnati. Many excellent advances have been made in its teachings, it has kept abreast with all that is progress of to-day, and it is justly famed for those three alliterative words, "Practical," "Clinical" and "Medical." It has fine surgeons and gynecologists—none better in the Union; and yet when you hear of Pulte you hear of it only as a first-class Homeopathic College and not as the college of some one man with all the others of the faculty "sticks." Pulte is the alma mater of many of our most eminent practitioners, and they all hark back with fondness to the times when they sat and listened to the lectures. Pulte now has under its control, thus insuring abundance of clinical material, the Protestant Home for the Friendless and Foundlings, the Cincinnati Orphan Asylum, and the Deaconess Hospital. The genial Walton is the registrar and Dr. Buck the dean. The faculty numbers such homeopaths as Geohegan, the last president of the State society; Stewart, McDermott, Crawford, Pauly, Geiser, Walton, Buck, Snow and many others. This is their twenty-seventh annual trip.



"JABEZ PEABODY, M.D."

No, thank you, we are not the father of the "Jabez Peabody" letters in the Clinical Reporter, good and graphic as they are. We do not stoop to anonymity, as we have had occasion once before to say, and we should certainly not do so in a contemporary journal. Our first duty is to our own journal. The only instances of what might possibly be termed anonymous writing were the "Doctor Gus" letters of some years ago. But these were so transparent that no one was deceived as to their authorship. And no deception was intended. We have been tempted many times

in the past two years to wake up "Doctor Gus" and pour out his tribulations once more upon our readers. But time and space did not permit. The authorship of the "Jabez-Peabody" letters to us, seems plain enough. But doubtlessly, as in the instance of that other and earlier Anonym, the author of the Junius Letters, this later author will not find it prudent to let his identity ever be known. But here's lookin' at you, "Jabez," jist the same!

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Allium cepa in Peritonitis.

Dr. Mary K. Mack adds to the cured symptoms of *Allium cepa* in the following diagnosis of diffuse peritonitis:

A relapse left her weak and inert.

Tenderness in both ovaries, so that she sat and walked bent, and the uterus felt heavy and prolapsed.

Having been in the house for weeks, and the sun serving as a temptation, she took a walk of three blocks.

I was sent for that evening, and found she had taken cold.

The symptoms were violent sneezing and coryza.

The upper lip and nose were red and almost raw from the discharge and constant wiping. *Allium cepa* m.

The following morning she was met on the avenue, walking briskly, and smilingly said that all her cold and pains even were gone, and that that powder was quick and sure, and she wondered how a medicine, intended to cure sneezing, could cure ovaries at the same time.

Her old symptoms had failed to respond before that, and I am sure I was as surprised and even more pleased than she.

Sambucus in Malaria.

Dr. H. W. Conrad ¹⁸⁸⁸ says: "I have used *Calendula* in every imaginable solution of continuity and it has never failed to benefit, though I have had occasionally to combine it with other remedies to effect a perfect cure. Six cases of gonorrhea have been perfectly cured by using it as an injection in

solution varying from 20 to 50 per cent strength. Combined with Hydrastis, equal parts, I have cured five obstinate cases of gleet. It is invaluable as a local application in vaginal solutions of continuity and in discharges of the cervix. In obstinate catarrhal discharges from the vagina a few tampons saturated with Calendula usually accomplish a great deal.

Reviewing the past year I cannot now recall the many cases in which I have used it successfully. The last case in which I used it was following an amputation of arm. On account of pain I removed the dressing several days sooner than I otherwise would have done. After removing the stitches there was some gaping in the center and at the angles. I filled the places with Calendula, applied adhesive straps and gauzes, and at the next dressing the stump was nicely healed.

It prevents suppuration and stops it when present. In fact, I sometimes think that the appearance of suppuration is the indication for its use.

It is my intention to use this remedy, full strength, in the next suppurating tubercular joint affection that comes under my care. If that fails I shall combine it with iodoform as an injection."

Thallium for Baldness.

In the "French News" column of the Chemist and Druggist we came across a note on the effect of Thallium, which we have no doubt homoeopaths will soon turn to good account. Here is the paragraph:

"Dr. Huchard read a paper at the last meeting of the Paris Academy of Medicine on Acetate of Thallium, which was formerly advocated by Dr. Comberale, of Lille, as a medicament against profuse perspiration in certain cases of serious illness. It appears, however, that its useful influence is counterbalanced by the fact that it causes the hair to fall off with great rapidity. Dr. Huchard exhibited at the meeting several photographs of patients who had become quite bald in several days. He was consequently very emphatic against the use of the remedy."

There is all the difference between the two schools in this note. To the allopath this is a "curious effect" merely, and serves to condemn the drug. To the homeopathist it brings to light a new remedy for a troublesome affection which is by no means too well provided for.

Thallium is a rare metal, whose atomic

weight is 204.2, its symbol being Tl. It receives its name from the green line it gives on the spectrum, through which it was discovered by Crookes in the residuum left from the distillation of selenium. Thallium has a bluish white tint and the luster of lead; is so soft that it can be scratched by finger nail. Specific gravity, 11.8. It belongs to the lead group of metals but has peculiar reactions of its own. It is used in the manufacture of a glass of high refractive power.

Calendula in Surgery.

Dr. C. Hoffmann Peters²⁰ re-enforces the opponents of quinine in malaria by describing the case of a young woman whose chills had only been aggravated by that popular remedy. The case, of six months standing, was extremely irregular.

"Sepia stood out most prominently in my mind because she was a perfect sepia picture. However, as I had not made it a habit to prescribe for pictures I began and took her case. The first symptom of importance she gave me was a severe tickling low down in the throat which produced a constant cough. This always from the first came on from a half to an hour before each chill. Chill irregular, would last from one to two hours, followed by fever, and scarcely any thirst. Second stage followed by sweat when awake, but as soon as asleep skin became hot and dry (opp. thuja), the sweat stained the linen yellow. These were all the symptoms I could get. I gave her three powders of sambucus nigr. 500x., one to be taken each morning, dry, on the tongue. The day following the first powder, she had a severe chill, since which time (now six months) she has not had a sign of a chill."

Blatta or. in Asthma and Emphysema.

Mr. C. K., age thirty-nine. Employed at post office. Has suffered for five years. Has been treated for five years. Has been treated for two years to my knowledge, without any benefit. Main remedies were phos., ipec., rhus. I then saw him, and after physical examination recorded the following: Clinical symptoms: Heaviness on the chest on lying, amcl. stooping. Dyspnea. Hard cough in morning on getting up. Cough after sleep agg. by dry air and sunshine. Wheezing; heard even at a distance. Expectoration white, lumpy, agg. by hot drinks. Remarks: I began with ipec.,⁹ which relieved for a month. Kept him on it (6th and 3d) for two months. Five months

later gave him blatta 6th, and he returned in about two weeks much better, and says the medicine is "grand." Gave him more at intervals for slight relapses. Met him last month and he is practically cured. Now nearly four years.—John Arshagouni, M.D.²⁰

Calcarea carb. in Asthma.

Mrs. B., age forty-seven. Married. Large, stout woman. Has had frequent attacks last few years, nearly every time after coming home from the country. Last year was relieved by ars. c.c. Same remedy in various potencies had no effect. Pathogenetic symptoms: Asthma in the forenoon when taking a walk in the open air. Difficult respiration. Must sit up and incline body forward. Aversion to cold air. Clammy sweat on hands, feet and legs; amel. at night and from exertion. Worse 3 a.m. to 9 a.m. Remarks: It was given about ten days after this attack commenced, and her symptoms were distressing. Relief followed in two hours and continued to improve, so that breathing was quite clear. Teaspoonful in water every hour for twenty-four hours, and a powder three days later.—Dr. B. G. Clark.²⁰

Natrum mur. in Diseases of the Lachrymal Sac.

Dr. Wassily, of Keil⁸, reports the following case:

Aug. 8, 1895. Miss G., aged thirty, suffers from a swelling of the inner canthus of the right eye, as large as a bean. When pressed, a watery secretion, which is liable to become cloudy, escapes. The conjunctiva palpebrarum reveals a moderate vascular injection. Her general health is not good. She has much headache, usually in the forenoon, with improvement toward evening. She has pressure in the stomach in the afternoon, thirst, bowels inactive. The urine frequently has a reddish sediment; menses regular, with profuse leucorrhea before and after. Windy and wet, cold weather aggravates the complaints of the eyes. Disposition depressed and irritable. Natrum-mur. 200, a dose night and morning for three days.

September 6th. The general condition is much better; pressure in stomach is gone, and the headache nearly so. No essential difference perceptible in the lachrymal sac. Natrum-mur. 200, a dose every week.

November 20th. The enlargement of the sac has disappeared; only with difficulty may a drop be squeezed out. Natrum-mur. 300, a dose every ninth evening.

December 21st. The patient wrote me, in speaking about the case of the child, that she has no symptoms of the disease in her eyes remaining, and her general health is perfect.

Nitro-Glycerine in Spasmodic Croup.

Dr. G. G. Marshall²⁸ has found in nitro-glycerin an ideal remedy for spasmodic croup where steam inhalations and emetics fail, or where they depress too much to bear repetition. He recommends it to be given in small doses frequently repeated. To children from five to ten months old he gives from one ten-hundredth to one six-hundredth of a grain, repeated in from five to ten minutes if no effect is noticeable. Usually in ten minutes there is marked relief in the dyspnea and general appearance of the child. By repeating these small doses from every fifteen minutes to once in one to three hours, the laryngeal spasms are controlled. Sometimes it is not necessary to repeat it more than once or twice; at other times the remedy has to be continued at more or less frequent intervals for two or three days.

A Proving of Sepia.

A striking confirmation of the well-known Sepia indication of Hahnemann is sent us by a physician of Baltimore, whose name is withheld at his request.

His wife, a typical Sepia patient, came to him with a headache. On well-known mental indications, weeping, irritable mood, etc., he gave her Sepia 6x, his own dilution. Three days later she reported that she was having leucorrhea that came from her in long stringy ropes; that there was a feeling as if all of her internal organs were falling from her; and that she wanted to sit with her limbs crossed to prevent the organs falling out.

The physician assures us that his wife is perfectly healthy, never had leucorrhea before, that the remedy she took cleared up the headache, and that she has no knowledge of materia medica.



BLOWING HOT AND COLD.

Dr. Chas. S. Mack (homeopathic author) of La Porte, Ind., contributes a letter to the New York Medical Journal on "Of what, if or any, cure is similia similibus curantur the law?" From the fact that the allopathic journal publishes the letter (and without the customary footnote) it may be inferred that the old

school like the argument. We copy the concluding paragraph:

"Whether or not there really is such a cure as is above defined, I think the tentative assumption that there is, and that *similia similibus curantur* is the law of it, is proving to me useful as a working hypothesis. At all events, this tentative assumption makes clear, I think, that there is not necessarily any inconsistency in one's accepting homeopathy and at the same time accepting rational medicine and empiricism, attempting in any given practice of homeopathy a cure quite different from that which he attempts in any given rational or empirical practice."

Certainly not. There is not necessarily any inconsistency in one's accepting "Protestantism," and at the same time accepting "Catholicism" and "Mohammedanism."

And yet there is still lingering in the homeopathic profession the echo of that last year's impassioned Macedonian cry for a Revision of the *Materia Medica*! Revise the Professors and Authors.

PROFESSIONAL PRIVACY.

The reading of a legal decision that an account for medical services to be collectable by law must itemize every item of service rendered, giving the date and the amount charged, calls out this article. The book in which all this is entered must be the first and original entry. So that a pocketbook with shorthand characters to indicate calls made, and so forth, so commonly used by the busy doctor is valueless. But is the physician protected in procedures even of that order? Let us see. He treats the head of an interesting family for a specific disorder which likely enough may not have been gotten in a cabinet d'aissance, and is extremely nasty, requiring much time and care and medicine. Shall that be recorded each day, with amount charged for washing and bandaging and treatment, in order to entitle the doctor to a standing in court, in a very probable event that this same masculine head of the family will later on dispute the bill? What would the courts do with a physician who presented that or a similar form of daily record in open court in order to establish the justice of his claim? And what would that ex-patient do later on if not put under peace bonds? For goodness' sake do let us have a few laws made to favor the doctor.

This reminds us of another bit of news recently culled from an exchange, something like this: An old physician, one of the book-

ish kind, had made it his invariable habit to make a minute record of each day's work; who the patients were, their disease, the medicine, amount paid and so forth, as one might fancy one of these dairy doctors would be like to do. Among his many patients was a lady suffering with some incurable disorder. He had been watching that case carefully and scientifically, noting minutely the trend of symptoms and sufferings, the action of treatments and operations and medicines. When the old doctor died he willed this common case book to a brother physician in order that this later proprietor of the common case book might read up this peculiar case and follow it out to the end of the patient's life and then present it to the profession for its enlightenment and instruction. There's the case. Now, has not the old doctor violated the tenets of his profession in giving to another the secrets of his practice? Has he not violated the confidences of all the other patients whose names and cases are minutely detailed in this record, which is now the property of another, who may or may not use it for his own financial increment? This book habit, this taking down in writing everything that a patient says, is a mistake and will deter a patient from telling all she knows, even if at the very beginning of the written cross-examination she does not lose confidence in the book doctor and refuse to tell him anything.

AGAIN, ANN ARBOR.

In a little leaflet just issued by the Homeopathic Department of the University of Michigan—the Ann Arbor School—we learn of its continued prosperity, especially as it refers to Gynecology and Obstetrics. Professor C. B. Kinyon says there were ninety-two clinical sessions held in the hospital amphitheater during the year in the presence of the seniors and juniors. He also says (which is more to the point in the known absence of such custom in some other of the colleges) that "each and every member of the graduating class had several weeks' training as my chief assistant;" and "they were in turn given charge of the after-treatment." There were 490 operations with but two cases of post-operative abscess and suppuration—both which happenings are explained. The following paragraphs from the little report speak for themselves:

We did not operate upon every case presented, but often tried faithfully the homeopathic remedy.

This, with the aid of judicious local

treatment, cured many cases without resort to the knife.

In short, we endeavored as best we could to keep ever in mind the fact that the highest duty of the true physician is to cure the patient in the quickest and safest manner possible.

We believe it is our duty, as a teacher, to do what we can to check the modern tendency of resorting to surgery to the exclusion of the old and tried therapeutic measures. In this way we hope to make our students practitioners of whom their Alma Mater will feel proud.

All of which confirms what we have previously said, that the Ann Arbor School is rapidly taking its place at the very head of the column: that it is busy building up the strongest homeopathic institution in the world, and not scrapping among itself or finding fault with its "Secretary of War" and everything else. So we have again spoken well of the Ann Arbor School. And will do so again as the occasion presents. Every man in that faculty is a homeopath and teaches it with the belief that homeopathy is not only something to look into, or a good thing to know something about, but that it is an absolute essential in the practice of modern scientific medicine.



THERAPEUTICS OF SUICIDE.

W. B. CLARKE, M.D., Indianapolis, Ind.

As to the therapeutics of suicide—that is, in the contemplated or unsuccessful cases which we as practitioners must sometimes meet, the homeopathist may confidently refer to his materia medica. The influence of mind over mind, or mind over matter, if you prefer it that way, should be powerfully exerted even to the verge of "suggestive therapeutics," as Bernheim calls it, but not carrying the treatment far into that realm. Some guiding symptoms for various remedies are appended:

Ant. Crud.—Loathing of life, especially where there is sulkiness, depressed vitality, and the white-coated tongue.

Argentum nit.—Continually thinks about killing himself, especially in catarrhal and paralytic-tendency subjects.

Arsenic.—Has dreams full of care, sorrow

and fear, and is especially indicated in cases where financial losses have been suffered.

Desire Death.—Aur., Bell., Sil.

Aurum met.—Presents a great suicide picture, having a pronounced distinguishing feature of desponding melancholy with suicidal tendency, especially when there has been trouble with friends, from grief or disappointed love, and often religious mania.

In Belladonna the injuries are usually inflicted when in delirium, and in younger full-blooded subjects.

Platina and Puls. belong to the sadness, bad humor and melancholic group.

China, or at least quinine, ought to be one of the greatest suicide remedies. I believe its abuse causes many suicides and even murders. Its mind and head symptomatology is so voluminous that I can here only suggest reference to it.

Cimicifuga has mental depression, with suicidal tendency, especially in females "out of gear."

Graphites has a peculiarly sad and despondent condition, thinking of nothing but death.

Nux vomica.—Great anxiety, with inclination to suicide; Psorium, the same.

Hyos., Stram., Bell., Cannabias, and Hellebore should be especially studied.

Thuja and Phytolacca have loathing of life.



A DAMNABLE OUTRAGE.

At the examination of the Pennsylvania State Board held last June, there were 57 homeopathic applicants: 35 of these failed; 28 of the 35 were '98 graduates of the Hahnemann Medical College of Philadelphia. The Hering graduates passed without difficulty, as usual.—Medical Advance, August, 1898.

If this excerpta is true—and we have heard from other sources that the honor-man of Hahnemann was among this assortment of rejected ones—it goes almost without comment that there is grave cause for overhauling the present Pennsylvania State Board of Medical Examiners. It is preposterous to assume that twenty-eight men graduated from a college as far in advance of the general medical profession, and as well abreast of the Homeopathic wing as is Old Hahnemann of Philadelphia, could fail upon a State examination, while those of other colleges—notably the Cleveland and the Hering Schools—passed without the batting of an eyelid! Hahnemann is too well manned and officered and too well famed for thoroughness to have its graduates slaughtered in this hecatomb fashion. There is vil-

*A paper on this subject was prepared for the Nashville meeting of the Southern Homeopathic Medical Association: before this—the therapeutic—part of it could be reached by the reader, the gavel fell. Subsequently the paper was lost. But this was the original draft from which the Nashville paper was prepared.

him somewhere. And if Old Hahnemann permits this outrage to go unwhipped of justice, it may find that other colleges may not scruple to make much of it. Is it true that an ex-professor is doing the baby act—getting even for an old-time slight put upon him? Think of it for a moment, as coolly as you can this fearfully scholastic September day; with Dudley and Mohr and Thomas and James and Goudno and Bigler and Van Lemnep and Snader and Bartlett and Bibliographie-Bradford and a whole line of other famous men in Old Hahnemann—specialists each in his own department—think of it—and twenty-eight of her graduates rejected by a petty State board! Then stop thinking and engage with us in a few moments of silent obituary remarks for the infamy which some one is trying to put upon Old Hahnemann.



DR. CORNELIA S. STETTLE.

In company with her daughter, who was to have remained in Paris, and Mrs. E. M. Camp, a good friend and neighbor, Dr. Stettler sailed for Europe, July 28, in the steamer *Frederich der Grosse*, of the North German Lloyd line. She was in excellent spirits, but weary and in need of rest from overwork. She died on the voyage from what was declared to be cardiac paralysis.

The above, a footnote, is taken from a beautiful tribute from the heart and pen of the gifted Julia Holmes Smith, was found in the *Clinique*. Dr. Smith has so perfectly and so beautifully stated the facts in the case that little remains for our editorial pen.

But we feel the appropriateness of mentioning our little acquaintance with the departed. This began on board the *Labrador*, of the Old Dominion Line of Royal Mail Steamships, plying between Montreal and Liverpool, in the closing days of July, 1896, when a number of American homeopathic physicians, including also two other homeopathic sisters, our dearly beloved Dr. Nancy Williams of Maine, and Dr. Flora Brewster of Baltimore, were on our way to the International Homeopathic Congress. Our sojourn on board this steamer was pleasant. We met every day; for hours we paced off the length of the vessel, discussed the weather, the sea, the shuffleboard, the nationality of tramp steamers, the stars, the clouds, the steerage folks, the number of miles gone over, and the ever-present hope of soon seeing land. We turned many little close

groups on deck, discussing our interesting cases; our special work—for when at home many of us were distributed to widely distant parts of the United States—our best results with this or that or the other remedy. Our memoranda books and pencils were in frequent demand, and many of us learned of some new technique, or of some new treatment in a hitherto obscure case from these daily councils while lounging in the shadow of a sail, or wrapped up on a steamer chair in the shadow of the cabin, or huddled together near the engine room when the weather was heavy and murky.

Like the rest of our homeopathic pilgrims, she fully entered into our bohemian spirit, and accounted herself one of the "boys." She also accepted her *nom de plume* as calmly as did Friar Tuck and the Greek Professor and Lord Duffield and Pandora. She was our Cornelia with her jewels. And a good time we had on that outbound trip. From Liverpool we went to London via the London & Northwestern. There we parted. We met each other only on public occasions after that while on foreign soil. Dr. Stettler was at the sessions of the Congress. And was the one and only lady speaker at the Hotel Cecil banquet given the profession by the British Homeopathic Society. After that we lost sight of her. She went to France and other points with a lady companion. As Lord Duffield and this writer were about to take an overhead train at Liverpool for Alexandria Dock we met again. From that time we were daily companions until we parted at Quebec and later met again at Montreal.

Our next meeting was this past summer, only a few weeks ago, at Omaha. We had several reminiscent chats. We then noticed what the tribute of Dr. Smith so beautifully described as that peculiar air of languor and overtiredness which seemed to overshadow and surround her. She was always a charming woman, a good raconteur, with an attractive personelle. So we were astonished to learn in the *Clinique* that Dr. Stettler has a daughter old enough to be left at Paris. She seemed to us a very young woman. And if she had the sorrows and tribulations so sweetly and graphically depicted by the eloquent pen of Julia Holmes Smith, then they were never paraded and no one of that European party suspected them.

And thus cometh the first break by death in our circle of Americans. Who of us now recalling the happy woman, the ever cheerful

face and good natured smile while aboard ship, or even so late as at Omaha, but a few weeks ago would have dreamed that she, this woman of all others, would be laid in mid-ocean ere another meeting of our Institute! She who to all outward seeming was the embodiment of health and physical vigor. Where will come the next break in our ranks? And we go on and about our duties unconcernedly giving thought only to the immediate present. Thinking naught of the sorrow that cometh to all.

Her burial at sea, we fancy from what we know of her, would have been her request, could she have had the ordering of it. We have many times conversed with her on the beauty of the sea, of its majesty and awfulness, its eternity of age, especially at evening, as the moonlight shimmering o'er the rippling or the rapidly undulating surface. She was a lover of nature in all its physical grandeur.

And the great American Institute of Homeopathy—having lost this young and progressive and enthusiastic homeopathic sister—what then? Give place to her name in a perfunctory list at the back of the Transactions that shall be published according as the treasury ebbs and flows once or oftener in thus and so many years. And that shall be all. The Memorial Service is meaningless. Other, living issues are far more vital. And Stettler, the rare woman, the good doctor, the skilled surgeon, the sweet-minded, large-hearted, and soft-handed, takes her place with the many others who have gone over—with Dake and Holcombe and Dowling and Lilienthal and Norton and Farrington, and that long line of Institute heroes, who wrought in the heat and burden of the day and accomplished the building of our great national body—which will last, let us believe, to the uttermost duration of the classic bronze soon to be erected in Washington. Let us go about that Memorial Service in a different, far nobler spirit. Our forbears must always be to us a shining light. If we lose our hold on them we are lost. The immediate business of the Institute is trivial in comparison, and not one whit so great or so important as the respect and reverence due our great ancestors. That we are enabled to sit in convention to-day, unmolested and respected; that we are recognized as a power in the world is due in great part to the labors performed by our brethren and sisters whose voices are hushed in Immortality, and to the labor of that band of faithfuls—men and women who yet abide with us. But each year

abridges the interval when they, too, shall put on the Incorruptible. Let us not be ungrateful. Let not our memory of the dead dwindle into an asterisk placed against our name. That and nothing more. There is time enough to conduct the proper business of the Institute. There is time abundant to dwell in loving memory on the virtues and labors of our friends whom we shall see here no more again forever, nor till the heavens shall cease to be. Men and brothers, give o'er a little the mad chase after temporal benefits, and meditate upon this universal fate of mankind. Spare one evening each year for an honorable service to our honored dead. Let it not be made a mockery.

And thus the loved and respected, the sweet and gentle Cornelia Stettler passes from our view. A young life, a life devoted to the alleviation of misery and suffering, the assuaging of the Bitter Cup which may not pass away—has gone out and will be heard of no more. To this sad fate we are all hurrying fast. Thus must we all be sooner or later. A long and loving farewell to our departed sister. It was given to her to meet the angel Azrael while possessed of all her faculties, hopeful and loving, filled with the vigor and vitality of life. Falling by the wayside, not after weary weeks or months of lingering agony. It was the ideal Death. That for which every doctor longs. To die in the harness. It was God's last, best, noblest gift to our tired sister—that she might go to rest upon His bosom, and be lulled to Infinity and Immortality without a pain, without a fear. Farewell.



Pil. No. 50.

The Clinical Reporter.

I tell you it's darn hard work to write a book, and I'll pay handsomely for a few practical wrinkles. But let me tell you a little about authorin'. Betsy has just set me a-itchin' to write a book. She says, says she, "You can do it just as easy as not." I says, says I, "Betsy, it's all darned nonsense. Ain't you noticed that them authors has got almost as many titles as a tapeworm has jints? And what show would a fellow stand who's only got an old-fashioned 'M. D.' at the tail of his paper kite?" "Why, Jabe Peabody, what air you comin' to? You've doctored them mini-sters' families for more'n forty year for nothing; and what are them theological seminaries good for if they don't give dead-head titles for dead-

head practice? You can git any title you want, 'cepting a D. D.—there ain't enough of them to go around—but anything else can be had for the asking, if you've got the right one to ask for it. There's Doctor (Betsy said the name right out, but I ain't goin' to); his book says he's an A. M., M. D., and you know just as well as I do that he couldn't get through the common school down there to Podunk, where he was raised."

I had disremembered the doctor that Betsy mentioned; but as true as you live he had stuck in the mud a darned long ways this side of A. M.; yet that title's flowerin' on the first page of his book like a hollyhock on a dung-hill. Queer that I didn't think of it afore. "Betsy," I says, says I, "you've made it plain how he got his title; but how in h— did he get up his book? That's what sticks me!"—"Jabez Peabody, M.D."

[This is well put. We are a foolish people, living in a democratic form of government and yet "chasing" after titles. A title honestly earned in due course is all right. But a title conferred out of respect or compliment—vide the un-American slobbering of several universities over Dewey—is nauseating. If you are traveling on your titles, imitate the foreigners and also add the name of the university.]

The Homeopathic Physician.

On Friday, July 29th, at 12 noon, there appeared on the bulletin board of the Press office, at Seventh and Chestnut streets, Philadelphia, in large letters, this announcement: "Dr. William Pepper died suddenly last night in California."

[After reciting at some length the birth and labors of this extraordinary man, his titles and places of honor in the profession and social life, the H. P. says:]

Some surprise may be elicited that this journal should give up so much of its space to the obituary notice of a physician who, however distinguished in his career, was nevertheless not a homeopathist, and was generally supposed to be hostile to Homeopathy. This supposition was, however, erroneous. Dr. Pepper, in the later years of his life, became impressed with the idea that there was a great underlying truth in Homeopathy. He never advocated it; he never practiced it; yet he insensibly fell into the moles of thought that would suggest a knowledge of Homeopathy.

He was so broad-minded that he would willingly have admitted the teaching of

Homeopathy into the University of Pennsylvania, had it not been for the opposition of his fellow-practitioners who had not his liberal intelligence and keen penetration of the future.

For this favorable attitude toward Homeopathy, for his liberal desire to establish it in its proper place as a part of a university education we cordially commend to the homeopathic profession the memory of Dr. William Pepper.

[We gladly add our tribute to the memory of this man and brother by giving this space and these few excerpts from the beautifully written obituary by our brother, The Homeopathic Physician.]

New York Medical Journal.

Some time ago I was called during the night to see a patient in the agony of a chordee; the day previous he had taken large doses of the bromides as a prophylactic, but seemingly they had no effect. Noting that the glans penis and the prepuce were very dry, and sensitive, and seeing a jar of vaseline on the dresser, I thought it rational to expect to relieve him by anointing the glans with it; but I was not prepared for the complete, instantaneous results, for, as soon as the glans was well smeared, the entire organ became flaccid and of necessity painless. This he tried again during the two succeeding nights with like result.

Soon after this I had another patient with gonorrhea and advised vaseline as above used should chordee develop, which it did in due course, but as quickly vanished under the soothing influence of the vaseline on three distinct occasions.

Not being able to recall having read this at any time, and deeming it might be of use to others, I put it before them.—George W. Ely, M.D.

North American Journal of Homeopathy.

The materia medica conference died at Omaha, regretted by many, mourned by few. Had it gone on steadily along the lines at first laid down, and had the same honest energy and wisdom been displayed in its conduction that were displayed in the various sections of the Institute, good and permanent work might have been done. As it was, in spite of neglect and mismanagement, it notably revived the flagging interest in our Materia Medica, presented many vital questions for discussion, and prepared the profession for harmonious

effort in *Materia Medica* work. It has accomplished much more than the section in *Materia Medica* could possibly have hoped to do, and now that its labor has somewhat cleared the way we hope the *Materia Medica* section will take up the work the conference has so weakly abandoned.

[Ah, yes, "had the conference gone on steadily along the lines at first laid down!" But it didn't. Hence, it died. Instead of doing all these good things it at once sought to uproot and overturn the whole structure of Homeopathy. It caused distrust and doubt. And out of it grew the cry for Revision, Revision, Revision! Hence it died.]

The Medical Visitor.

"It is a fallacy to consider the present system of medical examining boards a success. The qualifications of the student should be known before his alma mater gives the degree, and he should not be held responsible for his foster mother's short-comings. The State medical examining board holds the graduate responsible for the defects of his college, and may grant him the right to practice medicine in one State only; the National Board of Inspectors would hold the college responsible for its own defects, and grant the graduate the right to practice in every State in the Union. * * *

"It is a fallacy to consider every modern claimant to medical fame as greater than Hahnemann. Hahnemann was one of the greatest speculative philosophers of his time, one of the most practical psychologists, one of the profoundest thinkers, and the greatest physician. The results of his work will live for all time. In the near future may his grave have a fitting monument, and our profession's tribute to his memory soon rear its artistic head in our nation's capital."—E. C. Price, M.D., in *Hahn. Monthly*.

Homeopathic Monthly Review.---London.

* * * The body was slightly shrunken, but what most struck the onlookers was the short stature of Hahnemann. On asking those who knew him, we got the reply that the founder of homeopathy was, in fact, very short. * * * Hahnemann's body was completely decomposed. There was only found a long tress of woman's hair twisted around the neck, probably Madame Hahnemann's hair.

[And so another of the world's giants was a small man measured in feet and inches. This was true of Napoleon, Wellington, Hannibal, Cæsar, Alexander and Pompey. True also of Thiers. And is equally true of many present day heroes in war and literature. If we dare say so without implied blasphemy, we would quote Celsus who pronounced Jesus as "small, ill-favored and ignoble." Grant was not a tall man; neither was McClellan, nor Phil. Sheridan, John A. Logan, or Benj. Harrison. And so the line might be extended to the crack of doom.

And so our great forebear was found, even in death, with a woman's hair on his body. Singular fatality or accident. And how one touch of nature makes the whole world kin! But Hahnemann is dead. Let us try to forget it. It was "probably Madame Hahnemann's hair."]

Globules.

Has any one noticed that on the gold medal found in Hahnemann's coffin, when it was opened at Montmartre recently, there was engraved the following inscription: "A leu: Maitre, les Homeopathistes francais. Similia similibus curantur." Are we to infer from this that Hahnemann himself spelled it *curantur* and not *curentur*? Doesn't it look that way; if he and his immediate disciples used that spelling, what reason have we now for believing that *curentur* should be the form? This would answer the question of the American Institute of Homeopathy as to the proper spelling in order that it might be officially adopted.

Every time he touches the right wing of his nose or fondles the right side of his moustache it causes fluttering of the right ear drum, not painful, but disagreeable, interfering with the hearing. What is the remedy?.

We entertain the hope that our French confreres will cast the session of the 1900 Homeopathic Congress not earlier than the last week in July. Many of us will not miss our own Institute meeting, and this is usually the last week in June.

Don't forget that the International Homeopathic Congress meets next at Paris in 1900, and arrange to go with this editor and his party. Our 1896 party was small but select.

and every member thereof was pleased and expressed a willingness to try it again in 1900. Expect to have special rates and special advantages. Our French brethren, notably Drs. Cartier and Simon, assure us that the presence of the Exposition there during the same time will not interfere with our Congress, nor raise the price of rooms and entertainment.

A dog life insurance company has been started in Chicago. There is a chance for the fellows that don't pay their physicians to get the right kind of life insurance.—Foulon.

The words were *natrum muriaticum*. But one of the professional stenographers who blew the bellows for us at Omaha reported it as interior mordecai!

Please hurry up and return to the Recording Secretary of the American Institute of Homeopathy the manuscript of your speech sent you for revision. Your tardiness delays the publication of the transactions.

The New York Pharmacal Association, manufacturers of Lactopeptine, are issuing a beautiful desk calendar, the scene of which, in amler, is entitled "Duty," and represents a modern William Maclure, on horse back, in a storm, visiting the sick of a village.

The condition known as "giving way of the arches" (*pes planus*) is one often overlooked. Its course is slow; during the process there are reflex pains referred to the ankle and knee, which are usually believed to be rheumatic in origin and treated as such. In the last stage the periosteal coverings of the bones forming the arch become swollen and inflamed, pressing upon the adjacent nerves and giving rise to excruciating pain. Such a case is now under observation by Dr. M. B. Miller, who advises the following mode of treatment: Absolute rest of the feet, meanwhile they are carefully measured by a specialist in footwear for shoes which are built with steel braces to support the arch. Time and patience must be freely spent until the requirements in each individual case are fully met; it will then be found that the artificial arches so sustain and support the weight of the body, that immediate relief is experienced. For the restoration, partial or even entire, of the arch, much can be done. As the condition is caused by a relaxation of the ligamentous tissue, pedal gymnastics

and massage are advised, also bathing the feet frequently in cold water—constitutional tonic treatment if necessary. These means, however, are unavailing without proper footwear.

Dr. Joseph Price (Denver Medical Times, July) thus closes a paper on the Importance of Simplicity in All Surgical Detail: I assert without hesitancy, from conviction, that the great broadening of our therapeutical resources and our great advance in both general and special surgery are largely due to our general practitioners. From their ranks came the fathers. They have not indulged in lofty flights, but have stayed down on the ground and followed the plain, simple ways of common sense.

[Thanks, we feel better now. We were fearful that being merely a G. P. we, and others like unto us, were back numbers, not fit to associate with the surgical people.]

Dr. Sinclair, of Manchester, is responsible for this bonmot: "Modern medical students learn surgery, which but few practice; nearly all practice obstetrics, which few learn."

And now the several inventors of antitoxin are having a dispute over the priority of discovery. Now watch out for some delugings of the medical press with inside information that will sit poorly on the professional stomach.

A good cry is beneficial to a woman. Crying does not consist merely in the shedding of tears, but includes so general and widespread an action of the muscles that the whole body is convulsed and the blood pressure in the brain is much reduced.

When materia medica is honestly taught, as Hahnemann would teach it were he with us to-day, and not as a mere adjunct to the other seventeen chairs, then there will be no longer any cry about Revision, Revision, Revision!

A medical man went to Omaha. Left his best case in charge of a brother doctor. On first visit said brother doctor brushed the medical man's powders off the table, saying: "That's all nonsense. I believe in giving medicine." And he gave something in a glass so that after three doses the patient was almost moribund, and it required three other doctors

to keep off the "wooden overcoat." The medical man and the brother doctor are both homeopaths. The old school now has that family. *Revise Materia Medica!*



It is a fallacy, says Dr. Price, to expect to get a totality of symptoms, because we cannot get all the facts in each case. But when we treat a case of typhoid fever, do we find all the symptoms in that case that give us the picture of typhoid fever?



According to the *Northwestern Lancet* for August 1st, says *N. Y. Med. Jour.*, Eskimo women do not breed during the winter months, and their menstruation ceases at that time. The natives of Queensland are also said to have a special breeding season, though menstruation with them continues throughout the year.

[Reads like a leaf from Darwin.]



Dr. Ussery (*Dietetic and Hygienic Gazette* for August) recommends bananas as an excellent food for typhoid patients, inasmuch as the banana, though a solid food for all practical purposes, containing, as it does, some ninety-five per cent of nutritive matter, does not possess sufficient waste to irritate the ulcerated mucous membrane. Nearly the whole amount taken into the stomach is absorbed.



From 1775 onward, Washington was continually causing all recruits to his army to be inoculated with smallpox—to prevent their getting smallpox! This was done under the urgent advice of the leaders of the medical profession in America; for though belief in the giving of smallpox as a preservative against smallpox, was dying out in England, it was still believed, as an article of faith, by the American doctors, who then, as now, are most earnest in support of a medical fad when faith in it is dying away in Europe. Washington's army was prevented from attempting important movements by this inoculation.

In 1898 we sent to Cuba the flower of American manhood in the flower of their youth, who ought therefore to have been able to resist malarial influences. But as Washington had his recruits inoculated with smallpox, we inoculated ours with a worse disease—cowpox—whose true analogue is syphilis.

In a small army of about 25,000 men we soon had about 3,000 men in hospital from

sickness—some reports give 2,600 as the number, others 2,800, others over 3,000; it is too early to get the exact figures.

Had Spain been able to hold out a few weeks longer our army would have had to withdraw from Cuba. The luck which attended the undoubted skill of our navy, and that of the military arm of the army, forced Spain to yield just about two, perhaps three weeks, earlier than General Disease could come to her support.

Can any medical man, can any rational being, doubt but that the lowering of the vitality of our men, by thrusting into their blood the putrefying matter of a sore—for no advocate even of the rite will dare deny that this is what vaccination is—must have been a main factor in causing them to succumb to the deleterious influences of climate?

Of those who volunteered for the army at the recruiting offices of Philadelphia and New York 96 per cent were rejected for physical disability.

Of the militia, already a body of picked men, 33 per cent were rejected. What is the meaning of this? Does it not bear out the testimony in the same direction in Europe that something is going on which is producing a degeneration of the race?—M. R. L.



In "A Study of Saw Palmetto," by Will Scott Mullins, M.D., which appeared in our August 1st issue, an error crept in which might prove of some danger. On page 237 in the second paragraph, having reference to the value of the saw palmetto in lean persons, it should read: "For it is marvelous in its actions when given to the unnaturally lean person. And ANY person who is NOT lean because of some grave chronic trouble can gain from ten to forty pounds by the use of saw palmetto. This is true of persons who have been thin during life and are descended from lean ancestors."



If our editorial brother of the *Medical Visitor* doesn't "watch out" and stop writing against the church, he will be voted an atheist and infidel and not fit to occupy office in the American Institute of Homeopathy. Of course, in his John Alex. Dowie article he said nothing but the truth; but the truth may not always be told; or, rather, it is better to write with molasses than ink. We tried telling the truth about the church influence in college work and came within one of being thrown out of the Recording Secretaryship. Two things impressed us in the *Visitor* editorial:

first, that the Visitor craved the risk of a libel suit, and second, the marvelous familiarity of the editor with the Sacred Scriptures. And the greatest of these is the latter.

It has not been so very many years since the Germans first called the attention of the scientific world to the similarity between the diastase of malt and the ptyalin of the saliva. The use of diastase in medicine did not meet with very ready recognition from the medical profession. In the last five or six years, however, various pharmaceutical houses have given especial attention to producing products of this nature and in this way the medical profession have had their attention invited to the value of diastase in the treatment of the different forms of starchy indigestion. Dr. C. C. Fite, No. 1 Madison av., New York, has in recent years contributed some valuable articles bearing upon the curative power of diastase as well as the most improved methods in manufacturing the same, and will be pleased to send literature to any interested upon application.

We learn from a Detroit evening paper of recent date that Prof. Dr. Oscar Le Seure, of Detroit, homeopathic professor of surgery in Ann Arbor University, was appointed brigade surgeon, U. S. V. He is the first representative of the homeopathic school in Michigan to receive an appointment. We congratulate Prof. Le Seure and the Michigan homeopathic profession upon this preferment.

Parmec has solved some difficult chemical problems in the manufacture of his gold compounds, and wherever this remedial agent is indicated his preparations should be used. Send for literature.

Dr. Given's Sanitarium, at Stamford, Conn., for nervous and mental diseases, is one of the most favorably located in this country, says the editor of the Hahnemannian. It is a quiet, homelike place, arranged on the cottage plan, where the rest cure, massage, irradization, galvanism, dieting, baths, and everything pertaining to the best treatment of patients requiring special care, may be procured at reasonable prices.

Dr. William Spencer announces the removal of his offices to 1820 Chestnut street, Sept. 1, 1898, where he will be pleased to receive his patients and friends.

Book Reviews.

SCHENK'S THERORY. The Determination of the Sex. By Leopold Schenk, Professor at the Imperial and Royal University, and Director of the Embryological Institute in Vienna. Authorized Translation. Chicago: The Werner Co.; 1898.

We confess to some disappointment in this book. It may be that our expectations were raised too high by what we had read and heard in advance of receiving the book. There is no doubt that Dr. Schenk is deeply in earnest and that he believes that he has discovered the secret of nature by which male children can be had at will. But his book is filled up to within a very few pages of the end with a recapitulation of exploded theories on this subject, and then at the last he gives his own theory. This, in a very few words, consists in having the woman present urine that is absolutely without a trace of sugar. In order to do this she is put upon appropriate diet—which the doctor does not state—admits that he does not know what it should be—and when she eventually presents herself in this sugarless condition then the doctor permits nature to have its way, though the anti-sugar-forming diet is continued for several months afterward. He frankly confesses that he does not know what to do to ensure females in those who are built to produce males. The disappointment to us was from the fact that this diet which is powerful enough to change a woman's natural breeding disposition from female to male, must necessarily be severe enough to harm both herself and her unborn boy. We all know how Tokology is being regarded in later years—this idea of having boneless or soft-boned children in order that the mother may have easy parturition. If, therefore, a male child is born by the sugarless mother, is it safe to assume that that male child will be a strong child, stronger than a natural female child? It touches the male amour propre a good deal to have Dr. Schenk intimate and apparently prove that the father has little to do with the procreation of his child; that it all depends upon the amount of sugar in the mother's urine. Dr. Schenk gives some very fine rules for determining the presence of sugar. The book is handsomely arranged and printed.

The American Homeopathist.

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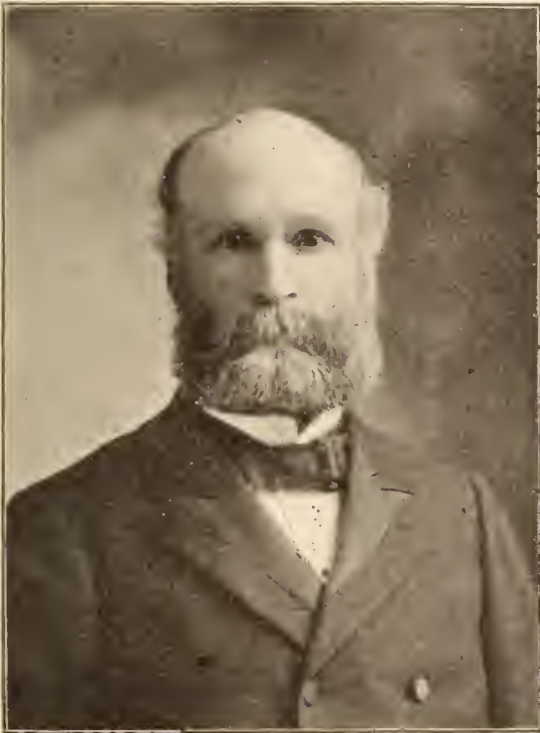
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NEW YORK, OCTOBER 1, 1898.

FRANK KRAFT, M.D., EDITOR, CLEVELAND, OHIO.

OUR PORTRAITS.



HENRY M. DEARBORN, M.D.
New York, N. Y.

One of the gravest faults of one of the wings of the profession is the multiplication of new remedies. This should not be. In this we but imitate the old school, which has countless forgotten remedies for every conceivable ail. Homeopathy is not a difficult practice when properly practiced. The best success ever attained was in the first fifty years, when her glittering rival, surgery, had not yet got her

knife in. Had it not been for those first fifty years of homeopathic success—without surgery—there would be no homeopathic profession to-day. It was materia medica and therapeutics which gave us our foothold.

If the homeopathic profession is to continue in existence it must revise its teaching of homeopathy as well as its materia medica. When more than half the chairs of a faculty are engaged in upholding the surgical idea, bacilli, and reflexes, and the other half are indifferent or ignorant of homeopathy, then it is not too much to say that the child is already born who will gaze upon McClelland's monument of Hahnemann in Washington and wonder why it was ever built.

There are a certain number of well-proven remedies in the homeopathic materia medica, say from fifty to one hundred, which, if well learned, from an enthusiastic teacher, will carry any medical man to success. But a little catch-as-catch-can smattering of two or three hundred remedies, read from a time-stained manuscript by an unpopular or unsympathetic teacher, will make bunglers, alternators, combination-tablet-users, and — surgeons of most of that class—with no offense to the surgeons.

The Institutes of Homeopathy, containing the why and wherefore of Homeopathy, should be taught in every homeopathic college of the land. It is the basic law on which hinges and rests Homeopathy itself. How can a minister of the Gospel preach the Glad Tidings, who does not know them? A college, therefore, that does not teach Homeopathy is not a homeopathic college, no matter how many coruscating and scintillating names it has in its faculty. And the Organon (Instituted) is Homeopathy.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

*Zincum met.*²⁰⁰ Cures Cataract.

Dr. F. W. Payne¹ secured the following brilliant result from zincum, although no symptoms of the drug refer to opaque lenses.

The case was that of a lady, fifty-eight years of age. Striae of opacity existed in both crystalline lenses, but the left one was so dense, and the visual acuity so greatly blurred, that it had become practically useless for vision, in consequence. The history of the case showed a condition of inflammation of the choroid in the left eye, whereby a degenerating change had occurred in the crystalline, causing numerous thin dense stripes of opacity in its cortex, with much haziness existing in the interstices between the radiating, dense striae. Her symptoms, all being referred to the left eye, consisted of a severe, bruised, sore, smarting, burning, itching and stinging sensation, at intervals, coming suddenly, as if pepper had been thrown into the eye, causing great and scalding lachrymation, much spasm of the lid's, and general cringing therefrom; these spells occurred more markedly and more often in the evening. The eye and lid had spells of burning and dryness, so intense, as to produce a feeling as if the eyeball was adherent to the eyelid, accompanied by a sensation as if a stick was under the lid, scratching the eyeball. Had spells of flickering before left eye; saw blue and green rings, floating in the left visual field; a green halo is seen, at times, around the flame of the gas jet. Although these objective symptoms might suggest a possible tension of the eyeball, such did not exist. A slight conjunctival irritation existed, with a tendency to lachrymation. Eye symptoms were all markedly worse from warmth, from warm days, and from artificial heat, both of which caused an aggravation of all her symptoms. She was impatient, nervous, tremulous, all being aggravated by every mental emotion. A marked choreic condition existed, with jerking of individual muscles of the face, nose, ears, mouth, and sometimes of the arms, which latter symptom necessitated much effort of the will to restrain, and which proved only partly successful. She had some jerking of the body

during sleep. The choreic expression was largely instrumental in calling my attention to zincum, which proved also equally effective in clearing the advancing opacities in the lens substance, as well as curing the spasms of muscles. In six months, under an occasional dose of zincum 200, the right lens had become perfectly clear, and the vision in the left was markedly and steadily gaining. Her eyes had compound, hyperopic astigmatism; the preponderance of astigmatic curve being vertical (90 degrees) in the right eye; while in the left it proved exactly at right angle to this, viz., horizontally (180 degrees). Glasses were adjusted that exactly neutralized the refractive error, and proved a comfort in use. Eleven years later, the right lens was still fully transparent, and the left lens, though having a few dense streaks in its substance, had cleared so that large, perfectly transparent interstices existed throughout its area, that permitted entirely distinct and practical vision. Under the proving of zincum met. are the following symptoms, viz:

The left eye is more markedly affected than the right, though both are influenced. Redness with intense burning, smarting, biting and itching, as from salt, in left eye. Scalding lachrymation. Sensation as if the eyelids adhered to the eyeball, and actually do so. Marked aggravation from all kinds of symptoms of zincum are those of nervousness, irritability, irascibility, and great impatience. Twitching of muscles, as well as jerking of various muscles. Choreic jerks through the body during sleep.

Orthoform, A New Anesthetic.

MM. Einhorn and Heinz² have just discovered a new anesthetic agent, to which they give the name of orthoform. This substance belongs to the chemical group of aromatic amide ethers; it is exactly "p-amido-m-oxyl-benzonitric ether." It consists of a white, crystalline, light powder; tasteless and odorless; is of feeble solubility; action slow, but as a compensation, its effect is durable. Orthoform produces soluble salts with acids, which also possess anesthetic properties, but they are acids, and therefore cannot be used upon mucous surface, to which they would be irritating. Applied to the surface of a wound, or an irritated mucous membrane, orthoform, in powder or paste, renders them insensible. This has been clearly proved by experiments upon numerous patients. In burns particularly,

which, as we know, are painful, orthoform stops the most violent pains in a few moments, and the relief lasts for many hours. As it is not toxic, rabbits and dogs absorb from two to six grams daily. A new application may be made as soon as the anesthetic effects subside, and this tolerance of the organism is most desirable, for example, in a case of cancerous ulcer of the face, in which the pains are so atrocious as to render sleep impossible. The ulcer should be powdered for a week, and the quantity applied should be 50 grams; the patient ceases to suffer, and no inconvenience follows the application. For cancer of the stomach many doses of a gram are given daily by MM. Einhorn and Heinz. In all cases of wounds or ulcerations of the skin or mucous membranes, it is strongly antiseptic, and hastens the cure of microbic wounds. It has no action upon the intact skin, but is powerfully anesthetic when used surgically upon the mucous membranes.

Nitric acid in Epilepsy.

Dr. Walter M. James¹ has had good results, as he here relates:

The patient was a young girl who had the epileptic attacks every month at the access of the menstrual flow, although they were not wanting in the intervals between the menstrual periods. At each attack the patient would fall down with a scream, and then go through the usual phenomena of the convulsions, during which both arms would become dislocated at the shoulder-joints. The patient would come out of these seizures with the exclamation, "What did you say?" and then a physician had to be called to reduce the luxation. The patient had probably been treated with mercury before the editor had charge of her case. Her tongue was deeply indented upon the edges, and with sore pimples upon the tip. Every day she had numerous insensible spells, called by pathologists "petit mal." These insensible spells would amount to as many as fifty in one day. Six years ago she came under the care of the writer, and he gave her a number of remedies without any perceptible effect until, after prolonged study of the case, he decided upon nitric acid. This was given in the two hundredth potency in occasional doses and persisted in, up to the present time. Then the spasms were found to come at longer intervals. Instead of once a month, they came once in two months, then once in three months. Later they came once in five months, then once in

six months, then once a year. At the time of writing this editorial there has been no spasm for one year and three months, and the spells of petit mal have been reduced to two or three a day, while some days pass without any at all! The bowels, which were obstinately blocked, are now regular, and the little woman is bright and hopeful and making herself exceedingly useful among her friends with whom she resides. In the last two or three spasms there was no dislocation of the two humeri.

Podophyllum for "Burning Tongue."

A young man had for some weeks a burning sensation along the left edge of the tongue, occasionally shooting down to the tip or through to the opposite edge. At times the burning was so severe as to be very distressing, and it was continually very annoying. His health had been somewhat impaired for years, the condition being somewhat like that commonly called "bilious" with a catarrh of the stomach, duodenum and bile ducts. At times the blandest food could not be taken without great discomfort following.

He had found some relief from belladonna, but mercurius, colocynth, arsenicum and thus tox. had been taken successively but the burning continued. Podophyllum 3x was finally prescribed and prompt improvement followed. In two or three days he was much improved, and in a week the tongue was well.

Podophyllum has a marked action on the mucous membrane of the stomach and upper bowel, and on the liver, stimulating its action. It should doubtless be used in many bilious conditions where some one of the mercurys is ordinarily given.—W. A. Burr, M.D.¹²

Symptoms Following Use of Camphorated Oil.

Dr. Francis S. Tidcombe, in the Lancet, states that a male child, aged one year and ten months, was given a teaspoonful of camphorated oil instead of "cough mixture." When the mistake was discovered (some two or three minutes afterward) the nurse gave the child a teacupful of water with a teaspoonful of salt in it. The child did not vomit or show any symptoms until about twenty minutes later, when he fell on the carpet "in a fit." The fit lasted "a few seconds," and the child remained unconscious. When I saw him he was quite unconscious, the extremities were cold, the breathing was deep and slow, there was hardly any pulse at the wrist, the eyes were half closed, and the pupils were widely dilated. I

applied hot sponges over the heart and administered a weak current of electricity. He rapidly revived and was again sick. As soon as he could swallow I gave him a copious draught of warm milk and water, which speedily returned. Within half an hour he was able to walk. He was sick twice more after drinking milk, and decidedly drowsy all day. The strength of the camphorated oil was about 1 in 4, so he must have taken about 15 grains of camphor.

Sanicula in Chronic Conjunctivitis.

Dr. R. E. Belding⁴ prescribed this unfamiliar remedy in the case of a boy aged five. Since he was one year old he has had inflamed eyes, especially the conjunctiva, which is very red, worse from playing hard. Photophobia, worse from sunlight. The lids are stuck together in the morning with a brown matter so profuse as to run out on the pillow. The eyeball is covered with mucus which obstructs the sight and has to be frequently wiped off. He has frequent diarrhea in the day time or in early morning. He has also a few itching pimples on the upper arm. *Sanicula* 10m (Skinner), seven powders, one to be given each day, cured in the space of one month.

[The proving on which this cure was based was collected by Deschere in the North American Jour. of Homeopathy, Oct., 1897.]

Asafetida for Excessive Sneezing.

Dr. O. S. Smith² offers this cure by the similitum where all local means had for years failed:

Mr. B., aged twenty-four, blonde and neurotic, for three days has been sneezing almost constantly. Similar attacks of several weeks duration in June and as many in July have, for five years failed to respond to general, local or climatic treatment. The nasal tissues were acutely hyperemic, and so hypersensitive that the slightest touch of the mucous membranes precipitated a prolonged and violent attack of sneezing, some chest constriction and "flying pains." Has always been excessively nervous at these times. As there was no discernible organic lesion, *asafetida* 2x was prescribed. The perspiring fellow was stripped of his flannels and finally induced to remove shoes and stockings while indoors. Two days later he had sneezed less than a dozen times, from which time the recovery was rapid and uneventful. I believe this to be a cure, and a per-

manent one, because the underlying neurotic factor and its symptomatology were covered by the similitum, *asafetida*.

Cuphea vis. in Cholera Infantum.

Ten years ago Dr. A. A. Roth⁹ reported his experience with this remedy in the treatment of cholera infantum. It read like an Arabian tale, but a little experience with the drug has taught us to have a great deal of respect for the red pennyroyal. Dr. Roth noticed that the best results were secured in those cases arising from acidity of the food; vomiting of undigested food or curdled milk, with frequent green, watery, acid stools; child fretful and peevish; can retain nothing on the stomach; food seems to pass right through the child. The symptoms remind one a little of chamomilla, but as they are studied it is seen that the systemic affection is deeper than one finds under the latter remedy. Dr. Roth used it in from one to five to ten-drop doses of the tincture, which is a beautiful dark-green color when made. No doubt but its action is dependent upon the tannic acid with which it abounds.

*Lachesis*²⁰⁰ in Typhlitis.

Dr. J. Fitz-Matthew⁸ reports: Delicate schoolboy, aged ten years, had been drinking bad water, eating green tops of some plant, and violently exercising at play. Symptoms: Frequent vomiting, yellowish, greenish, preceding; patient on his back, characteristic posture; right leg drawn up; erection of penis; hard swelling in right or ileo-inguinal region, intensely painful to touch or movement; temperature, 103; pulse, 130 to 140; tongue pointed, bright scarlet; always worse after sleep; would wake up, and then scream with pain. R *Lachesis* 2c (Dunham); second dose in half an hour; then every hour till improvement was evident; Sac-lac. to follow. Four doses were given. I found patient in the morning wonderfully better and out of danger. Later an enema of warm water removed a mass of very fetid fecal matter. Patient was now convalescent.



"In dry night cough, worse from lying down, better from sitting up, *hyoscyamus* will often give prompt relief." That is the way in which the average student learns it. But he is never told that the action of the remedy on the uvula is VERY peculiar! If he had, he would likely enough never forget the symptom.

LEST WE FORGET, LEST WE FORGET!

It is reported that the surgeon-general of the United States army is very much opposed to Woman on the field, and elsewhere; except ———. But this is no new cry. It dates from the Mosaic paradise. It is most assuredly not new to the "regular" school, either in medicine or theology. Woman's place is behind the cradle. Aye, verily. Scant business for her in the arts and marts of life. Little, if any, in literature. And, none, absolutely none, in medicine! We have said. Therefore!

Lest we Forget, Lest we Forget!

How ostrich-like these "regular" folks view the problem. They will not see. How they pat themselves on the shoulder, believing they and only they are the elect. How the old gray-beard, benight in all his uncomeliness doth delight to rise in meetin'—in all the churches—quote Scripture and urge that women be not admitted to civilization. Not fit, my lords. Not near so fit as the meanest of European spawn spit out upon our shores if he but be a male and have a vote. And the medical villifier joins the common issue and mumbles and mutters his anathemas on woman in the profession.

Lest we Forget, Lest we Forget!

They have forgot, these ancient "regulars," that except for woman there would ere now be scant attendance on our Christian worship. They have forgot that, but for her, our sweet and patient sister, the Christian Endeavors and Epworth Leagues and Church Extension Societies and the other some hundreds, aye, thousands of churchly helps, would long ere now have fallen stale, and flat, and profitless.

Lest we Forget, Lest we Forget!

They have forgot, these "regular" physicians, that, except for woman at every turn in professional life, nine-tenths of all the frowning, flippant, lowering profession would seek to-day employ at somewhat else. They have forgot their hell-broth of the not far distant past would more deadlier yet have proved to human life but for patient, nursing woman. They have forgot what Clara Barton wrought; and, before her, Florence Nightingale.

Lest we Forget, Lest we Forget!

They have forgot that She has been through all the time the fruitful field of man's unbounded sins. They have forgot that now, e'en now, except for her the myriad horde of surgeon-lets would be engaged in other fields of toil. They have forgot that ministering angel, Helen

Gould, and all her sweet and noble help in this, our hour of need, so that our soldier boys may live and need not die by reason of the shameful, painful, damnable mismanagement by the "regular" school.

Lest we Forget, Lest we Forget!

And yet. E'en we forget, forget. The college door is open. She may partake and graduate a doctor. And then? We refuse her fellowship, many of us, and stint that little courteous title "Doctor" due her work. We thrust our tongue into our cheek, and swallow twice and call her—"Miss" or "Mrs." Good lack, but we are grand and noble fellows, so we are, we males! We let her come into our faculty. Yes we do. But how we hedge her round about

Lest She Forget, Lest She Forget!

that she is only One Woman, and we are many men who may reject, who may reject.

Out upon such rampant hypocrisy! If woman is man's equal, give her equal place. In the medical profession she has shown herself man's equal. (Let it go at that.) Through all the years of woe and doubt she stood unshaken by the Faith of Hahnemann! She stands there still, looking beyond the grave of man-made Science, to the yet more noble and glorious resurrection of the Imperishable Truth of Homeopathy. She lowers no lance to Surgery. She has earned her place. She has her field in Specialties and holds it firm and undismayed.

Lest we Forget, Lest we Forget!

The American Institute of Homeopathy has rolled away the stone, and from the Grave of Centuries forthcomes the woman—our professional sister. She gives her equal place with man. She there has charge of business cares like unto her brother. She holds an office but two removes from chief. She sits in Executive Committee. She is President of the Southern Homeopathic Medical Association. She is co-editor of a prominent homeopathic journal. She is surgeon, gynecologist and specialist.

Lest we Forget, Lest we Forget!

Dispel the Rhadamanthine gloom. No longer beat her down. Meet her with gladsome hands. Encourage her for all the good wherefor she stands as type. Put her in college work as if she fitted there. Not as appendix to the man-made faculty. Give her that due proportion of the honors. Let her not always seem a cringing suppliant for medical bounty. If she has any place in our profession, she has

equal place. If she has any place in college work, she has equal place. She has wrought her full time in the quarries of poverty and privation, in bitterness and social obloquy. And she has won and rung her laurels true from hard reluctant hands. Take heed, take heed, O MEN of the profession.

Lest we Forget, Lest we Forget!

ARE WE DEGENERATING?

M. R. LEVERSON, M.D.,
Fort Hamilton, N. Y.

There seems to be little room for doubt that from some cause or other a slow but fatal degeneracy is creeping upon our race.

That this is so in England, France and Germany has been clearly established by the researches of some of the most eminent names in science, and has by most of them been ascribed to the practice of vaccination.

That the fact is true in the United States, whatever the cause may be, is made evident from the decennial censuses from 1850 to that of 1890.

A constant increase in the ratio of the dependent classes to the rest of the population is shown by those censuses. This general increase of ratio of the dependent classes is found to be greatest among the native white population, and but for one fact, presently to be mentioned, might be ascribed to the increasing pressure of the monopoly of the forces of nature, analyzed in so masterly a manner by the late Henry George in his great work, "Progress and Poverty."

But while this one cause may be the dominating one, it fails to account for the curious fact, first noticed by Mr. Zach. Montgomery, that this increase extends along the lines of our public schools.

Mr. Montgomery's observations are confirmed by the author of "Thoughts upon Institutions of the Higher Education," who started upon the inquiry, the results whereof are given in that work, in the expectation of refuting Mr. Montgomery, but found that his investigations only confirmed those of his predecessor on that line. Mr. Montgomery and the author of "Thoughts" turned naturally to the schools themselves for a solution of the riddle, but the latter stated expressly there must be some other cause as well.

One of these he has since declared to be vaccination, which has been forced upon the

people of the United States through the public schools.

But besides the increasing pressure of monopoly, the educational defects of our schools and vaccination, other hygienic defects exist and are factors in producing the above-mentioned lamentable result.

It is the object of this paper to call attention to one only of these, viz., our most unhealthy style of dress. In this men are worse off than women.

Nature has so constructed us that our bodies need to be bathed continuously in the ambient element in which we live. And this for several purposes. Our chief organ of excretion is the skin. Through it nature has designed that effete matters shall be disposed of chiefly by means of perspiration, both visible and invisible.

But also it is through the skin, in part, that oxygen is to be supplied to the blood. And both these intentions of nature, our mode of dress carefully tries to defeat; and a prurient morality teaches that the natural body—the most beautiful thing in nature—is something of which to be ashamed!

In obedience to this sham morality and real immorality and sinfulness, not only does public opinion compel the wrapping up of the body in clothing whereby it becomes bathed in an atmosphere highly charged with carbonic acid gas and organic poisons, and its real beauty is hidden; but foolishly devised laws have been passed to call that indecent which is really the most decent.

True decency is to be found in the naked contests of the Grecian youth in their public games, not in the mock modesty of prurient societies for the suppression of vice.

We physicians owe it to humanity to endeavor to counteract the immoral tendency of modern pruriency ycleped "decency."

Not only is the health injured by our system of clothing the body; but pruriency itself is promoted by the secrecy with which certain organs of our body are enshrouded.

We ought to teach the people the need there is for free access to every part of the body being given to the air; that Nature has done nothing of which she is ashamed and does not need foolish man to be ashamed for her; that children, up to the age of about ten years, should go absolutely naked during the summer, and in winter should wear only sufficient clothing to preserve them from excessive cold; and this would be very little, even in winter,

were children trained to the hot-air bath, at least once a week, and with appropriate gymnastic exercises daily.

A symposium on the subject is invited from physicians and other competent persons.



THE CORNERSTONE OF HOMEOPATHY.

"Materia Medica," says the Announcement of a prominent homeopathic college, "is the cornerstone of Homeopathy."

That depends. Indeed it would be eminently safe to say that it is no such thing. Mention a school of practice, from the earliest of therapeutic times, in which materia medica did not form the chief cornerstone. The old school, at this present writing, has a far more vast and in many respects more intelligent materia medica than we. The Eclectics have a materia medica of which any school may well be proud. So proud that almost every other homeopath of the modern day is using large segments of it in his practice in the belief that it is Homeopathy. Materia Medica, therefore, is NOT the cornerstone of Homeopathy. It is the cornerstone of every system of medicine.

The cornerstone of Homeopathy is the application of the principles of Homeopathy to the use of Materia Medica. That's the vital difference, Messrs. the Announcement compilers. Mark well that difference.

When the homeopathic professor of materia medica takes up aconite or nux vomica and merely fills out his hour with a reading of the symptoms, but utterly fails to tell how those symptoms were elicited, what they mean, how they can be used, he fails absolutely of being a homeopathic teacher. The old school and the eclectics, when they teach aconite or nux, tell the class what power and what quantity of the drug to use. It may be wrong from the homeopathic standpoint; the student, however, knows something that may stand him in good stead when he feels the need for aconite or nux. But when the homeopathic professor dares not touch the potency question, nor the dose, and likely enough doesn't himself know either, and has never read the Organon of Hahnemann, or if he has, has only found the "bad" words in the Dictionary, then Materia Medica is NOT the cornerstone of Homeopathy!

Homeopathy is not Materia Medica—neither cornerstone nor keystone. It is greater than both. Teach honest Homeopathy and materia medica will become something a little

more succulent and toothsome than a bottom-of-the-barrel sermon. Then Surgery and the other specialties will take their proper place and not seem antagonistic. Homeopathy quarrels with no one of the specialties. It invites every aid that will conduce to the better taking of the symptom-picture, and applying the consequent and remedial drug-picture.

The cornerstone of Homeopathy is Homeopathy!



ECZEMA.

OLIVER SHOWER EVERHART, M.D.,
Middletown, Md.

Read at the Maryland State Meeting, May 17, 1898.

There has indeed been so much literature upon this one subject of eczema presented to the profession that it may have become a nauseous dose; but we know that some of the medical properties of our drugs are only developed through the continual grind and scrape together of our high potencies, and why should it not be as important to grind into the minds of our profession a clearer insight into one of the most frequently occurring diseases, and sometimes one of the most troublesome to the practitioner?

Eczema, as we all know, is a catarrhal inflammation of the cutis vera or true skin, running through various stages with a characteristic discharge. Of the etiology of the affection we know of various conditions influencing its appearance and course. Skins which it seems are always in a state ready to take to themselves any disease, which is due to a lower degree of health—dyspepsia often influences its appearance or kidney and intestinal trouble—gout and rheumatism or irritating nature of one's employment and various drugs, as rhus, merc., crot. tig.; and, lastly, conditions which will interest us mostly under this head is dentition in children; and pregnancy may also produce an outbreak. From observation and research I am becoming more and more convinced that this disease, as well as some of our specific diseases, may be procreated in the embryo, although the German dermatologists believe it to be entirely a local condition, while the English, and I may state from some of their authorities, that they lay great stress upon its association with rheumatism and gout.

The pathological conditions found are a round celled infiltration with inflammation and capillary congestion, which we know, as

all inflammation, is due to a faulty innervation. The principal seat of its action is the papillary layer of cutis vera. There is an exudation of serous matter, as in all inflammation, which will naturally soften or macerate the surrounding tissue, and, in doing this, pushes up the rete and separating the stratum lucidum malpighii and corneum forming papules, vesicles and later pustules.

Eczema may be an acute, as well as a chronic, condition, lasting but a short time or for years, beginning in the child on the head, and in old age travels to the lower extremities, trying, it seems, even to remove the last remaining support of his wretched racked frame. It runs through the stages of erythema, papulation, vesiculation and squamation, and always having a discharge or a moist surface sometime in its career.

The various stages are three: The initial consists of hyperemia, papulation, vesiculation and pustulation; second stage, exudation and crusting, it is of indefinite duration; third stage, desquamation and infiltration.

The minute symptoms, or, in fact, any part of this important affection, which is so intractable and distressing to both mother and child, cannot in such a paper be dwelt upon to any great extent.

This affection generally commences with some slight fever or some malaise; then in a very short period of time the first stage of the disease makes its appearance in the form of erythema, with burning and heat; then vesicles with more of an itching, the vesicles being filled generally with sero-fibrinous exudation, sometimes being blood streaked. Later we see the vesicles materialize into pustules, which pour out their contents, forming yellowish or brownish-green scabs. We now find ourselves transported into the second stage, or exudating stage, or stage of effusion. After a certain time the crusts gradually disappear, effusion ceases and there forms white scales. This, then, is the beginning of the third stage or desquamatic stage, and so the scales become finer and finally disappear, leaving the skin in a healthy condition. This disease, in the infants or children under five years runs rather an irregular course but the seat generally is on face and head, particularly anterior part of head, with a characteristic mucilaginous discharge which dries and mats the hair, and this gumming together of the hair is almost a positive diagnostic sign, even without seeing the head. On the back also

may be seen the gummy discharge, forming crusts.

The diagnosis of this disease is generally comparatively easy, although various diseases may at first be mistaken for it. Urticaria may be mistaken for it, but the history of sudden appearance and disappearance of white lumps will distinguish it.

Vesicular stage may resemble herpes zoster, but herpes are larger and always along course of a nerve. Scabies are but the scratch marks, and the nightly itching which is so characteristic of scabies is not present to such marked degree in eczema. It may be mistaken for syphilis, but syphilis is generally around mucous orifices; does not itch and is generally circular and is dry.

Treatment.—There have been various opinions thrown out as regards the treatment of eczema, some denouncing any local treatment at all, believing it interferes with the internal medication, while others treat it locally altogether. I feel confident the happy medium will bring the most brilliant results. Perhaps I may shock some of the profession in stating this, but there is as much in knowing how and when to apply your local means as it is to prescribe your internal drugs. When to stimulate, when a mild sedative action is wanted, or all these conditions must be studied as well as the similitum.

The diet of the infant is the first thing to be considered. If mother's milk is not of the most nutritious, wean and give Pasturized milk, and have regular intervals or periods to feed child and with this cleanliness of child. Speaking first of local applications, a mild sedative, of course when the condition calls for it is salicylic acid under 10 grs. to 5, bismuth subnitrate, starch and petrolatum. If condition is on head, after removing crusts which have been softened in olive oil, apply oil of cade and almond oil. In treatment of chronic squamous eczema, the use of green soap is gaining ground among our best dermatologists. Applying externally some of the drugs which we give in dilutions has met with due reward, such as graph., rhus tox., yellow ox. hydrang, etc.; but it is needless to go into detail with all the different applications, which are the best, for some may find one acting better under one condition and another man another. Of the most important internal drugs we find of use are acon., arsen., bell., bovista, also locally, canth., clem., graph., rhus., sulph., tart. emet., silicea, petrol., etc.

IMPROVED HOMEOPATHY.

Many of our readers, on being first called to a newly moved-in family, which it is found had always been in the hands of the allopath, are familiar with the statement that they know all about homeopathy, since they took a lot of it once on a time when "Doctor" Munyon came to the city and advertised so liberally. It may not be wise to contradict such prospective family of patients or the grandmotherly visitor. And still it is well at times for the practitioner to know that Munyon, himself, was always careful to say in his literature, that his was not the ordinarily accepted homeopathy, but a vast improvement thereon. In short an Improved Homeopathy.

Until this enterprising medical Hooley, and one other, Ballentine by name, entered the newspaper advertising field and gave away upon certain days basketfuls of remedies for inward rheumatism and backward corns, we were, as a segment of the profession, able to aver that the patent medicines and clap-trap stuffs foisted on a credulous public were the output of the allopathic school, almost wholly. This is true still, if we will but remember that which we were taught from the homeopathic rostrum: namely that Homeopathy does not deal in specifics, because we treat patients and not pathology.

But avast there, shipmet, and hold hard! Is that really true? Dare we stand up in the church-medical and thus make avow with flawless brow and guiltless tongue? Let us see a moment. How many of the graduates of our homeopathic schools who graced the church platform with their Oxford gowns and wash-bowl caps in the last semi-decade really and truly know that Homeopathy has no specifics; that it is anything better than a mild form of allopathy; that it is aught but a two-dram bottle with No. 20 pellets taken at long intervals? If these and the great hoard of old-style, pseudo-allopathic practitioners who were conceived in hermaphroditic homeopathy and brought forth in bastard gynecology had ever had a true understanding of what Homeopathy is and is not, would they be such users of "homeopathic" combination tablets and ishmalgander (a tablespoonful thrice daily for curing the most inveterate case of syphilis, or of spermothyelitis (same dose, for gonorrhea in all its varied and protean aspects)? And every honest homeopath knows in his inmost soul that the number of these sous-allopaths, who are trading on the "Homeopathy" in their diploma, is increasing

daily; that it is not confined to the indigent and ignorant class, but is as prevalent in the upper walks of the profession, which is not above accepting for its letterheads the copper-plate-name-stamp furnished by the old school druggist around the corner for his prescription blanks, and among whom no claim to laziness or over busy-ness can be laid for excuse.

The allopaths have been saying for some time past, in their efforts to get on our side of that forty-foot division line fence, that they have no objections to using homeopathic remedies when they think that peculiar form of mental medicine is more like to be popular with the newly moved-in family. And now we hear from those who are struggling to stand head and shoulders higher than any one else in the homeopathic field, that there is nothing in the law of Homeopathy which prohibits the use of any other means for curing the patient. And we dare claim that we are a progressive school of medicine, one built on an immutable law! What the old school has done from time immemorial—the dealing in specifics—we are now trying to copy! The old school—the better element in it—is quietly coming to the homeopathic way of thinking—as vide the life of the late William Pepper of old Jefferson College—but we, a progressive school, are truckling and creeping on our rectus abdominis perfectly willing to give away our mess of pottage in order that we may the more easily or more consistently delve in and steal from their mechanical accumulations.

Nonsense! That is not Homeopathy at all. It is a desperate effort made on the part of the would-be good-lord-good-devil surgical mechanics, who are doing it with an eye singled not to the glory of Homeopathy—for there would be no glory in such an infamous compact—but with a hope that the old school practitioner may in time be moved to call the progressive mechanical homeopath (?) in consultation and operation. If this be not so, will any one say what possible good can come to a homeopath from an amalgamation with the old school in its therapeutics?

No, there is no Improved Homeopathy any more than there is an Improved Christianity! He that is not with us is against us. The allopaths, while they fight us, respect us because of the good fight we have made. Even as the Americans knew how to respect their late foe, the Spaniards, in and near Santiago harbor. But no one has a word of love for the

"runner" — another political, religious or medical. There is no such thing as a liberal Homeopath, any more than there is a liberal honest man or a liberal Catholic. He is either a Catholic or a Protestant; a democrat or a republican; an allopath or a homeopath; half-breeds are anomalies and soon die out or become full-bloods. Ask the next eloquent speaker when he advocates the coming together of the medical schools what his individual purpose is in so doing. And you will find on scratching a little below the scari skin that it is No. 1 he is legging for, and not the good of Homeopathy. Commend us to an out-and-out traitor; but we despise a cowardly friend. Homeopathy needs all its workers and fighters to withstand the efforts of interested parties from throwing out of our profession what little of the old time Homeopathy still clings to the phylacteries of a few of the chairs of the modern school. You, who know what Homeopathy is and has done for you, look to it that your son or student is not engulfed in one of these pretended homeopathic maelstroms and comes back to you never again, or in form of neither fish, flesh, nor fowl. Examine the school as well as its annual announcement. Be not deceived by a long list of A.M. and LL.D. professors of whom you have never before heard, or of some one of whom you may have conceived a high opinion. It is as much as the student's life is worth to start him wrong. There are many really honest and thoroughly good homeopathic schools in this country. Be sure that you know where you send your boy. Thus and thus only can you be sure to see Homeopathy continued in the land which the Lord thy God gave unto you, and which the practice of Hahnemann caused you to be prosperous in.

TOO MANY DOCTORS.

As there is one physician to each 1,000 inhabitants in Buenos Ayres, it is proposed to close the medical schools there for a period of five years to prevent overcrowding of the profession. — Exchange.

[How very different from our own beloved country! Here we have room everywhere. Why, Sirs, there are communities, thriving and sickly, in Minnesota, where there is not a single homeopathic physician; so that the village corporation keeps a standing invitation on the galleys, imploring competent physicians to come up there and succeed. The medical

schools of our country invite, lo! every one who thirsteth for medical greatness to come up out of the woods, out of the carpenter shop, out of the country store, out of a living clerkship, and be made over into a doctor, or, if good luck attend the transformation, even into a surgeon. Board is so cheap in these college cities; the religious influences and Christian surroundings so plentiful; the street cars so accommodating; the clinical and venereal material so abundant in these modern, moved-away-from college localities; that it will be a long, long time before the medical schools will petition the people to give them a five years' rest from professoring, in order to give the doctors, who are now trying to make a living, a chance to make a living. Happy, happy, thrice happy Buenos Ayres! Only one doctor to every thousand inhabitants!]



Pil. No. 50.

Montreal Homeopathic Record.

Queen Amalie of Portugal, who took up the study of medicine in order to diet her portly husband down to presentable proportions, has taken up the X-ray, and is putting it to a novel use. She has been taking pictures of the various court ladies and giving them lectures on the deformities corsets produce, illustrating with the pictures, which show the bones in their crushed state.

[Just think of being the proprietor in fee simple of an earthly kingdom, with an annual income as great, or nearly as great, as a modern Gynecologist (of the cutting kind), and yet having to live on diet in order to be reduced to courtly proportions. What's the use of being a king if you can't eat and drink as you want, and go out with the "boys" and sometimes with the "girls" if you want? Can't a king have any fun? Must he always wear his Wellington boots and cocked hat and sit up straight in his soldier coat all be-dizzened and be-laced and be-hung with medals and orders and look pleasant? Can he never sit in his under-shirt and pea-jam-mies and smoke a homely "cob" and be called just "Tom" or "Dick" and not always "Your Majesty" or "Your Rile 'Ighness"! and when something goes cross-wise, spit it out with a — slam-like others of us non-kingly and non-gynecologically apparelled mortals do, or can do? And fancy your Lady Macbeth amusing and filling in her enforced leisure by X-raying her Court Dames and the First Ladies of the

Royal Bed-Chamber! Reminds us of the darkey who was being rawhided—some time afore de wah—for some offense. During the exercises the master lectured him. Pompey stood it as long as he could, then he blurted: "See yar, massah, if ye's gwine to whip, whip; but if ye's gwine to preach, preach; but don't whip and preach both, case I can't stand it!" If you are a king, be a king, every inch of you, and don't engage in cheap scientific experiments with your household.]

Annals of Gynecology and Pediatrics.

Dr. Joseph Eastman says that among other conditions coccygodynia is one which he has found worthy of attention in more cases than one. He believes it to be the imperative duty of every gynecologist, and neurologist, for that matter, in making an examination, to pass the finger into the rectum and to carefully examine the coccyx. It is well known that the coccyx may be bent forward by falls in childhood, or be broken backward by the foetal head in childbirth. This point alone has been sufficient to enable him to find in many cases a condition from which patients could only be relieved by the removal of the coccyx. He recalls one case in particular: The patient had her ovaries removed; she had been in a sanitarium under the best of care; had been given massage, baths, etc., for a period of nearly a year, and was declared to be incurable by an excellent physician. She recovered within four weeks from all nervous disorders after the removal of the coccyx.

New York Medical Journal.

The Dublin Journal of Medical Science for August quotes the Lyon Medical for July 17th as stating that the frightful catastrophe of the sinking of the steamship Bourgoyne recalls a lecture delivered some years ago by Dr. Dufour, of Lausanne. This celebrated oculist, interested in the means of securing a livelihood for the unfortunate blind, passed in review all the callings which might make use of the extraordinary power of hearing with which these persons are endowed. Among others, he declared that all swift vessels should have on board two men born blind to serve as outlook men in foggy weather. Dr. Dufour asserts, as a result of experiments made on the Lake of Geneva, that the acuteness of hearing in these persons is such that they can easily recognize at a great distance the noise of a moving vessel, and a fortiori the acoustic signals which it may make with the

object of furnishing exact information as to its position and course. The suggestion is a valuable and practical one.

[As Brer. Bones used to say: The deaf heard of him and the blind came to see.]

The Clinical Reporter.

There's more money in gynecology, just now, than any other line; and I suppose it's because there's more women than men, according to the United States census. So I made up my mind I'd write a book on gynecology. You see, I'd have the advantage of readin' up on Dr. —'s book, too.

* * * * *

I had to give it up and crawl into my hole. You see that selfish cuss hadn't left a darned thing for me to copy. He'd milked every darned one of the "authorities" drier'n a farrow cow! Every other page he had somethin' to say about "my experience convinces me," etc. Goll darn it! it wasn't his experience; I could tell him just which book he got it from. I seen through the whole thing; so I yelled out, "Betsy!" She came a-tearin' into the office. I says, "Betsy," says I, "I promised you I'd write a book; but, by Gosh, Betsy, it's so much like being a receiver of stolen goods, that I must break my promise and die an honest man." "Do you think you can?" said Betsy—for that stain on the bedroom carpet has kind o' soured her some. I says, says I, "I don't know, Betsy; but if I quit this darned authorin' business it'll be a mightier sight easier tryin' to."

* * * * *

Of course, books grows from books; I know that. But when an author has his boots made with the heels in front so that you can't track him when he's been stealin', and then cheekily talks about his "experience," why that's enough to give a vomit to the devil.—"JABEZ PEABODY, M.D."

The Critique.

Surgeon General Sternberg ought to get out of the way and let some younger man secure a surgical corps large enough to take care of General Shafter's sick and wounded soldiers. Dr. Sternberg may be an authority on bacteriology, and we believe he is so considered by his school, but as a Surgeon General he is a conspicuous failure. Certainly with our small army of 20,000 men only, in the field, he ought to have done better. He is also said to be an expert on yellow fever, and as such affords another illustration of a well recognized fact,

that experts are good for nothing but experts. A modicum of common sense would be worth more to our brave boys at Santiago than all of Sternberg's vapoing theories about microbic infection.—Editorial.

[Yes, it is true, as Brother Visitor has said, that the antiseptic treatment introduced into the army has robbed the field hospital of gangrene, erysipelas, etc., etc. But when there are no field hospitals, and no medical supplies, no nurses and no surgeons, then the beautiful system of antiseptics is foolishness. Instead of putting martinets in charge, let us have a few practical medical men, say like Helmut, or Terry, or Walton, or MacDonald in charge; then there wouldn't be any such horrors as the Concho or the Seneca possible, and wounded soldiers wouldn't have to walk or hobble from the line of battle a half a dozen miles to find a surgeon. Great is the Medical Autocracy of the Army and Navy! And Sternberg is its High Priest.]

New England Medical Gazette.

We understand there is a movement on foot to increase the working staff of the medical department of the [Mass. Hom.] hospital.

Anything which will tend to increase the development of this branch of the hospital work is much to be desired. The surgical part of the hospital has been developed to the utmost; money has been freely, almost lavishly, spent; the wards are for the most part replete with patients; we hear frequent rumors of the most excellent surgical work done, and of the younger men who are developing into good operators, worthy to succeed those now in charge when the time comes that makes it necessary. We receive elaborate special reports of the work of individual operators for their respective terms.

What do we hear of the medical side?

Outside of the yearly report, NOTHING! Who are the men receiving any special training that will enable them to follow successfully in the footsteps of the present most able corps of hospital physicians?

We do not know.

The growth of the surgical part of the hospital has been phenomenal. No better work is done anywhere, and we are justly proud of it.

But what has it to do with homeopathy?

NOTHING!

What does the development of the medical side have to do with homeopathy?

EVERYTHING!

It is by virtue of that, and that alone, that we have the right to call our hospital homeopathic.—Editorial.

[That talks! But this hospital is not content with the detection of the paramount necessity; it also suggests its correction. That talks better yet! The medical board has gone to work promptly and is fashioning the conduct of the hospital so that something truly and exclusively homeopathic may be shown.

Where will this notable and proper example be next imitated?

When shall we have once more hospitals, not given over to the shambles?

When shall we have once more hospitals where the agonizing cry of the operated-upon victim does not rend all the still watches of the midnight hours?

When will it be again possible to say thus and so went to the hospital to be cured and restored, and not always to be maimed and disfigured?

Yes, by all means, let us once more work up "The Medical Side of the Hospital."]

The Critique.

It will be quite in order next year for the Section on Materia Medica to consider the question of "Heteropathy," as a fitting sequel to the "Four Pathies" of the last Session, and to engage Eldridge Price for the sectional address. We almost reached this absurdity at Omaha (and perhaps some think we did, in spirit), but it will be better to exhaust the subject of the pathies as soon as possible, and be done with the nonsense forever. The insatiate desire of certain members of the Institute to pose as discoverers or elaborators had better be gratified and squelched at the same time. Then let us get back, or ahead, to subjects sufficiently rational to prevent ourselves from laughing at ourselves after our annual sessions are over.

Homeopathy needs no defenders nor apologists, and has nothing in common with Antipathy, Isopathy or Allopathy.

Now that we are assured that antitoxin is homeopathic to the disease called diphtheria, we ought to be furnished a complete proving, and we suggest that Gatchell and Humphrey, Royal and others, be delegated to do this work according to scientific homeopathic methods. They should also study the pharmacology of diphtheria toxin with a view to securing a better preparation than that now obtained in horse-serum. A great opportunity is here afforded for careful investigation and research.

If antitoxin be homeopathic, means should be adopted for ascertaining its specific indications; for no one will claim that it is homeopathic to all forms of diphtheria. Give us the pathogenesis, the key notes and the guiding symptoms, that we may apply at the right time, in right conditions and in appropriate doses, this remedy for which so much is claimed.—Editorial.

[This is bitter talk and bitter medicine. But (and one dare say so without treason) is it not true? The "Four Pathies" was a novel form of conducting the section. But what was gained? How many new ideas were elaborated by the scholarly discussion, and then promptly transferred to the Mellin's Food memoranda book, to be used in the very next case of that kind that occurred in our practice? Ah, gentlemen and brethren, you of the disputative turn, you are not helping the rank and file to cure their patients better and more expeditiously. Let's come back to Homeopathy!]

North American Journal of Homeopathy.

There may be an excuse for insufficient equipment of the volunteer army; there may be an excuse for insufficient food, although it is a well-known fact that it is the commissary department that maintains "the man behind the gun"; but there is no excuse for a department of which it could be said "they were short of cots, short of blankets, short of surgeons, short of supplies, short of nurses, short of everything"; that the department was in a state of complete collapse. There is no excuse, because if the Red Cross could rapidly organize and equip and serve a hospital on the field, supplying not only necessities, but comparative luxuries, there is no reason why the Hospital Department of the army could not have done the same thing. . . . It would seem that the department of the Surgeon General considered that one field hospital, with five surgeons, twenty litter bearers, a few tents, blankets and sheets was the proper equipment for the care of the wounded of an army in battle; but five overworked surgeons and over 1,500 wounded men could swear that it was not. The Surgeon General is said to have expressed the belief that the field was no place for women; the Red Cross have demonstrated how the wounded on the field can be tenderly cared for, and at the same time has apparently shown that a man may be an expert bacteriologist and not be alarmingly well versed in the equipment of field hospitals, and

the care of the wounded, although that is supposed to be his special business.—Editorial.

[And so the plot thickens. Each returning band of soldiers adds its tribute to the record of medical infamy. These carpet-knight doctors—these eminent bacteriologists—these excellent statisticians—these frowners-down of women—ought to be drumheaded out of the military department and made to do duty in some far more humble walk in professional life. The pity of it, Iago! With a whole country full of supplies, with money and men at command, this pitiful medical aristocracy, this allopathic corporation which governs the army and navy and was so largely instrumental in defeating the Congressional appropriation for a Washington site for our Hahnemann—this red-taped organization must needs scandalize our country, and cast reproach upon the whole medical profession. Let no guilty man escape!]

The Michigan Alumnus.

Twenty-four years ago the homeopathic department of the University [of Michigan] was established by special act of the legislature. From a modest beginning, having at first but one lecturer and few students, the college reached its largest enrollment in 1889, and the same year it graduated a class of twenty-four students. During the next six years there was a gradual falling off in the number of matriculates, and the homeopathic profession of the State attributed this decline to faculty disagreements and to unfeasible and revolutionary college schemes. Lack of confidence in the department lost the support of the patrons of homeopathy. Three years ago the faculty retired, and the Board of Regents immediately reorganized the school, selecting the present faculty. The number of professorships in the school is five. They include the practical chairs of practice, materia medica, surgery, diseases of the eye and ear, and diseases of women and obstetrics. In addition to the regular work in these branches, a complete clinical course in diseases of the nervous system is given at the hospital. Dr. O. R. Long of the State Asylum at Ionia gives a thorough course on psychiatry and its legal aspect. The didactic teaching in pathology is given by the chair of practice and an assistant. The students of the homeopathic college do their laboratory work with other students of the University engaged in the same lines of study. . . . Since the reorganization, confidence in the college has been re-

stand. The patronage of the University Hospital Homeopathic this year has been far in excess of any previous year. The hospital has been crowded to its fullest capacity, at one time this year having as many as sixty-five patients. More furniture and fixtures have become necessary, and by order of the Board of Regents have been secured. The hospital has been equipped with an elevator, an appropriation for an X-ray apparatus has been made, and many improvements are promised for the coming year.

An illustration of the renewed confidence of the Michigan profession in the college is shown in a recent action of the State Homeopathic Society. By a unanimous vote the following resolution was passed: "Resolved, That a vote of confidence be given to the professors of the Homeopathic College at Ann Arbor and that this society extend its congratulations to each and every one for his untiring efforts in the upbuilding of homeopathy at the University of Michigan."

Globules.

Three reprinted articles by Dr. De Witt C. Wilcox, of Buffalo, appear upon our table of which we believe *A Case of Experimental Bone Grafting* is the best. It did not prove a success, but the *modus operandi* was excellent, and a further trial by Dr. Wilcox will eventually prove satisfactory. It was a worthy experiment. *Technique in Thirty Vaginal Hysterectomies*, and *Ligation of the External Iliac Artery*, are equally meritorious and deserving of study.

A morning paper announces the burning of the Ocean Hotel at Newport. Many of our readers who attended the Newport session of the Institute will remember this seaside hotel. It was a large and very comfortably built hotel.

From the current Homeopathic Monthly Review (London) we find that Fettes and Freeman with that pregnant little foot-note calling attention to our little book of thus and such title and published by an unhomeopathic book publishing firm of Chicago, has now reached England. We hope now that the author will reap a substantial harvest from his clever advertisement of his little book. Printer, Ed., and some of those East end writers

ought to take notice of this very effective manner of getting your book before the profession.

Some of the soldier boys returning from the camps of the South declare that each morning each "boy" had to go to the canteen and drink his dose of whisky and quinine. If this be true, then, perhaps, that will account for the fearfully dilapidated and deteriorated condition in which even the "well" boys came back to us.

Dr. T. Griswold Comstock of St. Louis, accompanied by his good wife, are spending the month in Nova Scotia looking for cool breezes in the land of Evangeline. They do not expect to return to St. Louis until October.

"Shakespeare in Medicine" is Dr. W. B. Clarke's topic before the Marion County (Indianapolis) Homeopathic Medical Society, December 7, 1898. Dr. Clarke is a well-read Shakespearean scholar, as he is in other departments of literature. His paper will be a treat.

The Birmingham, Ala., meeting of the Southern Homeopathic Medical Association will be held at Hotel Morris (European plan), November 8, 9, 10, 1898. Thus early, things look bright for a good meeting. Much work has been done by Secretary McMillan, Drs. Ballard and Clapp (the local committee), and President Gutherz.

Let us have a rousing good meeting. The preparations made and the promise to be drawn from these shadow forth a first-class old-fashioned homeopathic love-feast.

"Guinea-cology" is a new but very pregnant word, coined by the editor of the (London) Monthly Homeopathic Review. It is very excellent, for it fits even in America, where we have no guineas. As we said some time since, our English brethren are developing a very saving sense of humor. For it is well known that guinea-cology and gynecology (pronouncing it after the Continental fashion) are very nearly synonymous.

Dr. O. S. Runnels, of Indianapolis, is chief surgeon of the Governor's staff, and has full charge of the returning soldiers who are invalided. A newspaper item describing the prompt and efficient manner in which the "boys" were met at the depot and taken care of, gives merited praise to Dr. Runnels. If

the great and glorious Government of the United States could once get away from the allopathic red tape, and encourage men of the accomplishments and professional attainments of Runnels to give their best thought to the army, there soon would cease to be any such scandal as we have had to stomach from the recently closed war. Sternberg is a good theoretician, but no practical doctor; just as we say a certain soldier—say George B. McClellan—is a good tactician, or martinet, but not a good soldier. The "contract surgeon" who now is pointed out as the black sheep, was doubtlessly an allopathic surgeon. In Cleveland one of these "regular" surgeons passed a young man of nineteen for military service at Manila, who had so poor a heart that he could not walk a mile in safety. We treated him for two years. He got as far as San Francisco. There he died of "typhoid" fever!

A commendable course is that pursued by the Parmele Co. when addressed by the laity respecting their preparation Arsenauero and Mercauro. The applicant for information is courteously referred to a local physician.

Does any one else feel like this editor, that he would like to see a picture of Sampson where his beard was not divided just exactly in the middle and his eyes canted toward the northeast point? Or Schley with that smile that is almost a sneer on his face? Or Dewey with his head stuck immovably in torticollis?

The Medical Century speaks of the next meeting of the International Medical Congress to meet in Paris in August, 1900. But our homeopathic readers will please note that this is not the HOMEOPATHIC Congress which is to meet in that city in the same year, but the exact time for which has not yet been determined. We hope that the time may be placed in August. This in order that it may not come to close upon the heels of the American Institute meeting.

It is said that the American Medical Association Sessions are managed by medical politicians who come there with everything cut and dried for the election of officers. They seem to be a distinct sect, who attend but for one purpose, and come from the Southwest. This is about as it is in all bodies of this kind, and it is the reason why many of us prefer to

stay away or decline to join such associations. The politician is the enemy of civilization and of human progress, and the world would be better if he did not exist at all. Strike him down!—N. Y. Med. Times.

Strange familiarity of language and sentiment! Where have we heard a similar refrain?

One of our exchanges, not now remembered by name, refers to an accident caused by administering chloroform to an accident case at night in order to do a quick operation. The fumes of the chloroform united with the burning gas formed a combination which overpowered several of the medical attendants and killed one or two of the nurses.

And speaking of chloroform reminds us to say that the Louisville Medical Monthly says that the use of chloroform externally on the abdomen in confinements, in the proportion of one part chloroform to two or three parts of olive oil and a warm compress placed over this, is far better as an anesthetic measure than the inhalation of pure chloroform. Worth trying, surely.

The death of Dr. J. C. Daily of Fort Smith, Ark., is announced to have recently taken place at Stamford, Conn. We had the pleasure of knowing Dr. Daily quite well, having had many interesting communications from him in relation to his specialty—electro-therapeutics. He was a very talented young man, amiable and kind. A heat stroke is said to have ended his life. Our sympathies to his family.

Dr. Tanner has staggered the House of Commons by the following question, which he has put to the president of the board of agriculture: "Whether the board of agriculture has any evidence to show that the *Solerostomum tetracanthum* worm is capable of causing severe epizootic attacks, and that the modern and moderate antiseptic remedy thymol will be of service as a nematocide?"—Cleveland Plain-Dealer.

[Reads much like a few lines from a page of Bacteriology.]

The second edition of Dewey's *Essentials of Homeopathic Therapeutics* has been received, and is, as its predecessor First Edition, up to date. Professor Dewey has prepared an

interesting and valuable book whose merit speaks for itself, and whose sale does not depend upon an appeal to sentiment. We heartily recommend this and his other books.

The English throwing down of the vaccination laws, leaving it optional with the people whether they shall be vaccinated or not, is a vast stride, we fear, backward and into the dark. Our brother of Indianapolis, Dr. W. B. Clarke, will not, of course, agree to this. If the many-times quoted statistics of the armies of the old world, where vaccination is still obligatory, show that smallpox still plays its deadly role, may one not also assume that the race has degenerated so fast since the introduction of vaccination by Jenner—not because of the vaccination, but in keeping with the general breakdown of the human race—that even so powerful a poison as vaccination once was will not longer retard the small-pox. And that the prevention of small-pox is not to be expected from the mere non-use of vaccine matter, but to the use of something still more powerful.

Dr. C. E. Fisher, our esteemed contemporary of the Medical Century, in order to be nearer his immediate field of general practice, has removed his office to No. 4,016 Drexel Boulevard, Chicago.

The New York Medical Times, current issue, quoting from an exchange, refers to the bacillar danger in the basin of the holy water found at the portal of each Catholic church, and into which each devotee puts his finger and touches his body therewith. And thus one by one the bacillus is undoing us and our fondest superstitions. The common communion cup which our dear Lord and Saviour introduced at the Last Supper has been found to be a means of communicating terrible diseases; now the holy water used for an equally sacred purpose is to be condemned and for the same reason. Well, well! What are we coming to?

An old story, doubtlessly, put into a new dress. But it is a matter of painful surprise to the average American to find how ignorant of America and American things the average—nay, even the better class of—Englishman is. This boasted-of-ignorance in the French we never note; but in Englishmen, it seems inexcusable. All things considered, we believe the Germans have the best idea of America of all the Continental inhabitants. You never

feel quite surprised in London to have some one at table ask you if you ever met Mr. Brown-Jones, who went to Illinois four years ago.

The second edition of Norton's Ophthalmic Diseases and Therapeutics has reached our table.

Dr. W. B. Hinsdale, Ann Arbor, is now ready to receive his friends and patients in his new offices, Thompson Block, corner State Street and University Avenue.

Says an exchange: "For ptosis look up gelsemium." We suppose a patient with ptosis would be glad to "look up" at any time and at any thing, if he could.

Dr. Biggar's son, who met with an accident recently while cleaning a revolver, is again in good shape.

Go to the Rudolph at Atlantic City if you want good accommodations and entertainment. The Institute members will do well to keep this in mind.

The Cleveland Homeopathic Medical Society held its first session since the summer vacation on Monday evening, Sept. 19, 1898.

When the Lord Mayor of London received the delegates to the world's Sunday school convention, the Rev. L. B. Maxwell, a negro Congregational minister, was presented as from South Carolina. The Mayor hesitated a moment, then asked: "Do you speak English?" "I generally do," replied Mr. Maxwell, as he passed on.—Daily Paper.

The Transactions of the American Institute are being sadly delayed by the non-return of MSS sent to authors for revision.

In cholera—or in any of its minor forms—says an old-school physician, give brandy, sip by sip, until patient is better; but NO WATER! however much the patient begs for it. It overcomes the nausea and arrests the discharges.

The American Homeopathist.

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The American Homeopathist.

NEW YORK, OCTOBER 15, 1898.

FRANK KRAFT, M.D., EDITOR, CLEVELAND, OHIO.

OUR PORTRAITS.



VICTOR FINK, M.D.
Dallas, Ore.

The students complain that materia medica is dry and dreary. It is not. It is the Professor who is dry and dreary. There is not a chair in a medical faculty with a more bountiful field from which to cull its facts and figures than has Materia Medica. When you next hear that complaint ask for the complainant's materia medica teacher, and investigate him and his lectures. There all the trouble lies.

Why do we not hear of the great surgical

and gynecological experiences among our English homeopaths? Their two (and only) homeopathic journals are always filled with cases cured under homeopathic rules and remedies. And even when surgery or gynecology is invoked and reported it will be noted that the homeopathic idea is paramount. This is equally true of the journals coming from Belgium, Germany and France. Why?

Let us hark back to Homeopathy now since so much clamor has been made for Revision, Revision, Revision! Let us insist that Homeopathy shall be taught in all our colleges. Let us bring it home to the faculty that even three lectures a week on Materia Medica is NOT teaching HOMEOPATHY!

Materia medica should be and can be taught as a story told by a good raconteur. It is a fatal mistake to read off a dreary manuscript, copied helter-skelter, hit-or-miss, from a dozen more or less of text books. The poorest auditor hearing a good story can repeat it in his own language. That is the way materia medica should be and can be taught. Then there will be a surcease of this meaningless clamor for Revision.

A teacher who is unloved of his class, who is tolerated simply because of the "club" he may wield in the "finals," teaches no one. And in later years the student looking back to that chair realizes not only the time lost, but also the fearful wrong done him in giving him the wrong bias. It is harder to unlearn than to learn. As Robert Collyer might say, let us have a few (Materia Medica) Sermons in Shoes.

We call attention to the paper in this issue by Dr. T. C. Duncan. It carries some seasonable suggestion touching the mastery of Homeopathy.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Senecio gracilis in Diseases of Women.

Dr. Frederick Kopp² states that *senecio gracilis* has the power of rendering the periods early, late, or even of suppressing them. It is consequently of service in the amenorrhea of young girls with dropsy. In dysmenorrhea from anemia it has a good reputation. It is employed in strumous cases, where the pain is worse at night. It is also used in other forms, whether the menses be abundant or scanty, provided that there be disturbances of urination. In retarded menstruation it acts rapidly and efficaciously, rivalling some of our best uterine remedies, as puls., caul., calc. carb., crigeron can., and sepia. It is used where the menses are too early and abundant, to be given during the periods. It is frequently indicated in irregular menstruation, whether it be too early or late. When the flow has stopped from a cold, *senecio* will often cause it to reappear. Very frequently, in young girls, a leucorrhea will replace the flow at the same time that they suffer from urinary complications. This complex yields rapidly to *senecio gracilis*. It is also a grand remedy in scrofulous young girls. If dropsy be present, it is the more indicated. It is sometimes useful in disturbances of the menopause, especially where insomnia is the chief and most distressing symptom. In these cases it brings on the periods and, at the same time, sleep.

Iolium temulentum---A New Drug.

Dr. Mossa¹² reports from Italy this case with comments. A carpenter, aged twenty-nine years, had been suffering ever since his eighteenth year of trembling in both hands, especially in the morning; of late also his legs began to tremble. It is remarkable that both his father and his brother were subject to the same ailment, while no definite cause could be indicated. He was first given *mercurius vivus*, then agarsins, which brought a partial but only transient improvement. Finally I prescribed *iolium tem.*, which in a short time effected a cure.

The pathogenetic effects of this remedy when given in the above way I at all are only

known to some degree from its effects when it has been mixed with grain and baked into bread. It has caused chest troubles, vertigo (thence the name darnel-grass, in German Taumelloch), trembling, paralysis with anguish and distress, vomiting, failing of the memory, blindness, headache, epileptic attacks, deep sleep and insanity. The good success obtained by the use in the case given above shows what curative effects may be expected from it in severe affections of the brain or spinal marrow. An Italian physician, Fantoni, has tried it in cephalalgia, meningitis rheumatica and in ischias.)

Gelsemium in Headache.

Dr. Berlin²⁹ cured this case on characteristic indications: Miss von P., about thirty-six years old, has been suffering ever since spring from a chronic headache, which last week came every day. It begins in the morning as a pressure in the occiput and neck, then gradually draws up over the head until it reaches the forehead and remains fixed over the eyes. Here the patient feels the pain pressing like a hundredweight. At the same time her head has a benumbed feeling and she is often incapacitated from thinking. The head is hot, the face red, and this the more according to the violence of the pain. The appetite is changeable; the patient also suffers from venous congestions of the abdomen and from hemorrhoids, which, however, cause her no trouble. During the headache there are frequent visual disturbances, everything before her eyes becoming black, and for a time she sees nothing at all. Toward evening the pains gradually cease. Since last September she has suffered much from cold feet. In the course of the summer she had repeatedly taken allopathic medicines, including quinine, phenacetin and migrenin. These remedies had occasionally brought some slight temporary relief, but the next day the pain returned all the same. The general health had always been disturbed for some days by these remedies; there appeared great weariness, buzzing of the ears, lack of appetite, nausea, etc., so that not much good resulted from the use of these remedies, and the patient finally altogether dispensed with the taking of allopathic medicines. She had before this learned to know the efficacy of homeopathic remedies, and accordingly she then came to me for help. On the 4th of September, 1897, in accordance with her symptoms, I gave the patient *gelsemium*

d. 3, giving daily four doses of five drops each. To remove at the same time the coldness of the feet, I ordered her to take warm foot-baths, and foot steam baths of fifteen to twenty minutes' duration, and cold foot-baths for one to two minutes. When her feet were cold, a hot application, when they were hot, a cold foot-bath, once a day.

On the 11th of November the lady consulted me again on account of some other ailment, stating that as soon as she had taken the gelsemium her headache was ameliorated and on the third day had entirely disappeared and had not since returned.

Bellis perennis Indications.

Dr. Goullon²⁹ calls attention to this indication for bellis, the common daisy, given by Dr. Burnett in his work, "Tumors of the Breast." On page 101 he remarks: "I would here give an important clinic hint with respect to bellis. It is of frequent use when the symptom is: Wakes early in the morning and cannot get off again." This phenomenon is frequently found, and strange to say it is usually connected with abdominal troubles. So also in the above-mentioned case we read: "The chest is sound; the abdominal tumor still is very large and the patient has altogether the appearance of a woman with child." After taking bellis she sleeps well and feels easier in the abdomen. Dr. Burnett continues: "In cases of pregnancy and of tumors of the uterus (also in enlargement of the heart) bellis gives great relief, i. e., it removes the effects of mechanical pressure." I can only confirm that also I have observed that when bellis was given owing to such an indication, the tumor existing in the chest considerably decreased in size.

Amygdalus persica, or Peach Leaves.

I wish to acquaint the medical fraternity with the use of the above remedy in an irritable condition of the stomach, whether reflex or otherwise.

Some eighteen years ago I had a case—a female with erysipelas of the face. After the disease had run six or seven days, her stomach became so irritable that nothing would lie on it. I used all my best known remedies, but could not stop the vomiting. She was in the seventh month of gestation, and fearing it would lead to an abortion, I was at my wits end, when a kindly lady said to me, "Did you ever use peach leaves in a tract to stop vomit-

ing?" I said, "No, I never heard of it;" but I soon had a tea of it made from the bark, as it was in the winter, and the second dose calmed that troubled stomach (I then said God bless the women, we can't do without them.)

My second case was in counsel with my wife (Julia Clayson Eberle). The patient was in her third month of pregnancy, and had reached the point where she could not retain food but a short time. She had had "regular" treatment before she came to us. We put her under the treatment of amygdalus persica, and in a few days she was well, having no more emesis during her term.

The third case was in her fourth month. She was in a pitiable condition; had been taking creosote in the "regular" way until anasarca had set in when she came under our care, when amygdalus was used, and in four days her stomach was so that she could retain food without the least nausea or discomfort.

I have used it in tincture diluted with water, also 2x, and 3x with children. Put three leaves in a cup and pour hot water over it, will do for a child—that is if you are caught in the country.—J. K. Eberle, M.D.¹⁷

Asafetida in Lacteal Derangement.

Dr. Belle Gurney¹⁷ treated a mother who had had chorea in youth, and during pregnancy. She had had three children, and had lost two of them. Her milk disappeared after four, three, and two months respectively, and the babies never thrived on prepared food. At full term another healthy (?) babe came to cheer the heart of the distracted mother. In one month the milk in the right breast was gone and so small in amount and poor in quality in left that it did not satisfy the infant at all and they had to resort almost entirely to prepared food. When five months old "bowel trouble," so called by the mother, set in and I was called; being a true homeopath I at once began looking for the cause in order to cure the effects, eliciting the foregoing facts. (Cham. 2c cured the baby.)

You will notice each time the milk disappeared a month earlier.

To sum up the symptoms—The nervous trouble, lacteal derangement, deep-seated bone pain, especially left side, with minor symptoms found under this remedy led me to give her asafetida 30, five powders, one every two hours.

Patient was exceedingly nervous for two days when a decided improvement was noticed

A general health and an improvement in quality of milk ere the end of a week. Also a slight swelling in right breast. Three weeks later noticed to be a slight decrease in milk. A dose of *asafl.* 2c was given. Some milk returned to right breast but she was afraid to give it to the baby. One week later the prepared milk was discarded and the babe has enjoyed its rightful food ever since and it is now a year old. She says if they are ever troubled with another baby she will have some of that wonderful medicine right away so as to prevent a return of the old trouble. An obstinate constipation disappeared, with marked improvement in general health, under the action of this remedy.

Lachesis Pains.

April 26, 1894. Woman, age thirty two, married, housewife. Has sticking and drawing pains in the muscles all over body. These come, last for a time and then are better for a short period. They are worse at night. Gets cold easily, which amel. the pains, but warmer wraps also amel. the pains. They wake her from sleep. All the body is very sore to touch, even pressure of bed clothes hurts her. Can get relief neither in bed nor on her feet. Always very thirsty. Tongue brown and thickly coated. Menses irregular and scanty. Profuse cold sweat all over body at night. *Lachesis* 60, one dose.

May 8, 1894, pains all gone. Soreness, sweat and thirst also gone. Tongue clean. No other medicines or adjuvant treatment. No return of symptoms.—Wm. D. Young, M.D.²⁰

Cocculus in Vertigo.

Halbert, of Chicago, in the course of a clinical lecture, refers to the fact that vertigo may be either objective or subjective. There is, from some cause, a disturbance in the visual appreciation of external objects or a mental lack of comprehension of what the eye sees. In such instances we may really term it objective perversion, because the particular object is not comprehended by a proper focus or else it is not understood in its natural condition. In other words, all comprehension is apparently normal except with reference to that particular object or that particular relation or distance.

There is, however, another form of vertigo in which the fault is due to systemic disturbance within the patient. For some reason there is a vertigo under all conditions and

relative to all objects. In other words, the fault is with the patient entirely, who feels himself moving, falling or swimming, as it may be. This is purely subjective, and generally it is associated with nausea or disturbances of the stomach, together with sick-headache. It is this class of cases which should call our attention to *cocculus*. We find its principal action is upon the solar plexus, hence the symptoms characterized by the loss of appetite, aversion to food, nausea in the morning, nausea with salivation, sick-headache and all the peculiar gastric disturbances, with the sensation of something abnormal in the stomach.

A case is reported which affords evidence of the value of *cocculus* in subjective vertigo when the irritation begins in the region of the solar plexus and gradually develops into the neurasthenic type with the occipital headache and lumbo-sacral irritation.

Trillium After Labor.

Woman, aged thirty. On first getting up after a normal labor had considerable bright red, bloody, uterine flow, with intense sacral backache as if whole pelvis would separate into two halves, which was agg. by a tight bandage about hips. Also a sensation as if the pelvic contents would drop out through the vulva; amel. on standing, less when walking, and none when sitting, this is agg. by wearing a tight perineal support. *Trillium* 15, three doses, then S. L. About twelve hours after taking the remedy had severe numbness in entire arms and both legs and feet, half way to knee. Passed off gradually in course of next twenty-four hours, and within thirty-six hours all above-given symptoms also.—Wm. D. Young, M.D.²⁰

Borax and the Cobweb Symptom.

Dr. Belle Gurney¹⁷ reports the following.

Mrs. D., age forty, mental vital temperament. Light complexion, but some brown spots on face. Very nervous, always doing for others, never idle. Very dainty in tastes and habits. Can hardly sleep at night without having taken a bath before retiring.

One year ago I visited two weeks in her home, during that time I noticed she had a good deal of difficulty in eating on account of her mouth and tongue being so sore. She said it had been that way nearly all the time for two years.

Small ulcers in buccal cavity, especially on gums. Tongue sore, hard, sensitive. For a long time she complained of a sensation of

cobwebs on the face; I frequently saw her brush her hands across her face to brush the webs away.

I was anxious to prescribe for her, but as her husband was a fine allopathic physician I felt reluctant to offer her some little pills. Finally I asked her if she would try some of my sugar pills and as she was sure they would do no hurt, she said she had no objections to trying it.

Lysterine and such things only gave a temporary relief.

The day before I left I gave her three powders of borax 30, one every two hours.

Next morning the mouth felt better. A week later the tongue, as well as the rest of the mouth, was entirely well. The sensation of cobwebs disappeared. Two weeks ago she told me she had no return of either trouble.



HOMEOPATHY AS SHE IS UNDERSTOOD.

Says the Cleveland Journal of Medicine of a recent date: "The 'homeopathic school' was begun by Hahnemann some years ago with the express object of excluding all knowledge of anatomy, physiology and pathology, and of barring the way to all progress by two iron-clad dogmas."

When found make a note of!

For crass and culpable ignorance of what Homeopathy is, we believe this deserves the ruban d'or. In a whole city full—very nearly two hundred doctors with Homeopathy conspicuously displayed in their diplomas—with about every fourth one of that number either an active or an ex-professor—with a college of the first order of eminence, one that has been in existence under one form or other of name (but always loyal to Homeopathy), for years so many that there remain but few who recall its original title—in such a city, with such a profession, with such a clientele—to have a journal, the official mouth-piece of the allopathic aggregation, give publicity to so ridiculous a slander almost passes understanding. And yet, and yet.

Call up at random, nine out of ten of the homeopathic graduates of, let us say, the last ten years—of those colleges in which the medical side has been the blind side, and the surgical side the side, and ask them, these nine, What is Homeopathy? Then marvel no longer that an otherwise intelligent contemporary is willing to print the above travesty on the meaning and purposes of Homeopathy.

President Mrs. Cook of Buffalo in reporting to the American Institute of Homeopathy at Omaha concerning the Ladies' Hahnemann Monument Committee, was justly applauded when she said that it was necessary to educate the laity regarding Hahnemann—who he was and what he had done—in order to have the proper amount of respect shown him, and to secure the equally proper amount of coin of the realm for the building of that classic bronze at Washington. But would it not be equally proper—nay, far more essential and vital to our interests—in order that the day may not come when it will be necessary to append a footnote to a page in the Washington Guide-Book explaining why Hahnemann has a monument at Washington—would it not be eminently fitting that we educate the homeopaths—and not only the masses but the classes—the teachers? If ALL the colleges will but teach Homeopathy for five years—teach it as if it was a living Truth and one in which they, in truth, believed—and not as a perfunctory adjunct to the Surgical side of the profession, then soon so foolish a definition of Homeopathy as that given above would cease to be a possibility.



MUNYONISM.

The N. Y. Med. Jour. of recent issue, copying from the Canadian Medical Review, says the Discipline Committee of the College of Physicians of Ontario held its inquest on the delinquency of certain of its members for having perpetrated a fraud on the public. This consisted, in one instance, of a doctor associating with some one else in promoting The Hindoo Remedy. Another doctor barely escaped being turned down, by showing that he had not prescribed the remedies but only acted as visiting examiner for The Munyon Co. He, however, promptly recanted, confessed his error, was shriven and forgiven. Another doctor was cast out because he was in the employ of this same company under an assumed name. Two other doctors were sinistered for being employed by the Munyon people. Speaking of the last indicted, "it is said to have been shown incidentally that money was received under false pretences by this company, for that 'pellets were bought by the barrel, and quart bottles filled with fluid with some of these pellets constituted an extract, well shaken up, and furnished to patients by ignorant girls.'"

So that our Lady of the Snows is somewhat

about of us in its manner of dealing with recommendations. Yet we know that this manner of obtaining a livelihood is not confined to allopaths. Two young men out of a homeopathic college were engaged at \$100 per month each to visit and prescribe for the Munyon company. They so continued to draw their fat pay until the company went into innocuous desuetude and smaller offices.

Have we any written code which forbids an intelligent but likely young graduate from accepting \$100 a month to make the gratis visits which the Munyon or any other medicine company advertises, or of being associated with other medical companies? Did not a now gone and almost-forgotten surgeon get his fingers pretty badly burned at Detroit with the K. & K. people? Why, then, should a young man, inexperienced in everything except hardship fail of falling before the temptation?

OFFENSIVE MEDICAL ADVERTISEMENTS.

A certain well-known Pharmacal Company, with a product deservedly popular with the profession, has one very bad habit, to wit, an overweening over-fondness for seeing its Pharmacal Company name blown into everything it issues, so that it robs itself of a good deal of favor and financial increment. Recently it sent a handsome booklet in colors and on a modern topic to every physician. It was so very pretty that but for this egotistical habit already referred to it would have been given place on the waiting room table. But no self-respecting physician will litter his waiting room table with so arrant and offensive a form of advertisement. So the pretty booklet found its resting place in the waste-paper basket. No physician expects a pharmacal company to present him a handsome oil painting, or give lithographic copies of the naval and military hero pictures, or any other form of attractive reading or picture matter without some suitable return. A decently worded and displayed advertisement in the beginning or on the cover or in some other one conspicuous place is forgiven. Indeed, the bare fact that the physician examines and admires the present and looks to see who is the donor ought to be of value to the advertising firm. For many books and pamphlets and circulars are never taken out of their "Personal" envelopes. But to have the company's name inerascibly printed in large letters across some prominent

part of the painting, or deeply embossed on each page of the booklet is offensive and—well—rubbing it in to the raw! We resent such belief in our gullibility and whenever such book or pamphlet or letter comes to us we throw it in the waste-paper basket. And we know of many others who do the same.

PNEUMONIA.

Collated from Discussions in the Clinical Medicine Section, American Institute of Homeopathy, June, 1898

The Immutability of Homeopathy.

The special etiology of pneumonia has changed absolutely since most of us occupied seats in college; but the symptomology has not changed at all. The patient suffers with the same pains; we look for the same characteristic symptoms now as we did then. There is another thing which has not changed since we left college, the symptomology of our remedies. The symptomology of our remedies is, in fact, all that we can use to-day of what we were taught in New York. Our methods of investigation, our ideas concerning the value of the methods have changed; but neither the subjective symptoms of the patient, nor the symptomology of our remedies has altered. Therefore, we have no reason to change our methods in determining remedies, especially if we use the valuable experience of the leaders of homeopathy.

The method employed in the treatment of pneumonia by the homeopathic physician depends entirely upon his own characteristics. Some of my friends use the pain as an indication for the remedy, others use the appearance of the sputa, and still others the complications present as an indication for the drug chosen. It makes but little difference what method is employed so long as the patient is prescribed for and not the disease. None of the symptoms which make the diagnosis of the disease are of much value in making the prognosis.

We might take as a text when treating this subject, "experience versus theory." We admit all the theories that have been advanced as to the cause of the disease, the cause of the crises, but we are not at all satisfied with the results attained by those who treat either on a physiological or a pathological basis; certainly we should not be when we have indisputable records of the experience of those most advanced in our art, of those who have used the subjective symptoms of the patients

and the complications of the disease as their guides in prescribing. We are not justified in throwing aside that experience or in ignoring their records because of the scientific investigations of to-day. But remember that true scientific etiology and pathology must be in harmony with all the laws of nature. In no way do they affect a prescription based on natural law.—J. B. G. Custis, M.D.

Heart Sounds Difficult to Distinguish.

It is not always an easy matter to distinguish between the part which the pulmonary valves and the aortic valves bear in this second sound of the heart. Now, however valuable it may be to detect the very first signs of cardiac weakness, I submit that it will be exceedingly difficult for the most expert ear in existence to detect in a patient, with the clothing necessarily almost entirely on, except a small opening—I submit that it will be almost impossible for the most experienced ear in the world to detect the failure of the pulmonary element in the second sound. Really I don't believe any one can do it. We can detect that the second sound is not so snappy and not so acute as it was, but that the pulmonary element is decreasing in intensity, I very much doubt.

The important sign, the one which at the bedside and not in the library, the significant sign by which we can detect an approaching heart failure, is the difference in the first sound, the muscular sound. The strain comes upon the right heart, and when heart failure begins the whole heart is involved; and the muscular structure covering the left heart fails also. We are all familiar with this sound in health; and I think that its alteration will be one of the first reliable symptoms of approaching weakness of the heart.

One of the first directions I make, and I always make them in writing and put it at the very top that the patient must not sit up under any circumstances; that the patient must lie still, however light the case, and that nothing must be done to put additional strain upon the heart which may subsequently become weak. It must be treated as if it were to be weak in the end.

As to external applications, I formerly used poultices altogether. I have come west for one of the many good things that come out of this glorious section of our country. I have gone to Denver for a preparation called anti-phlogistine. Use a thin coating of this and you need not change it more than once in twenty-

four hours. You can keep it hot by using hot water bags, and you will have everything you could gain from the poultices.—E. B. Hooker, M.D.

Hat-Pin in the Stomach.

I had the case of a hearty child about two years old who was taken suddenly ill the latter part of last February; he had fallen and apparently received a slight injury; examination found no evidence of injury, except a little blood in his mouth. He complained of severe pain in the lower part of his chest which was greatly aggravated by stooping. Later the only position in which he could be at all comfortable was lying on his back across his mother's breast.

Before his fall he had had a hat pin in his hand, and although diligent search was made, it could not be found. I believed he had swallowed the hat pin. After several weeks of ineffectual treatment, the parents were induced to go to Davenport and have the child examined by X-rays. The result was negative.

Eight weeks after the injury an intense attack of gastritis came on. This lasted four days, and was followed a week later by pneumonia involving the entire left lung. He died of hemorrhage about fourteen weeks after the injury. Five physicians and surgeons had been called in consultation, but the evidence of the pin being in the stomach was not sufficient to induce the parents to have an operation.

An autopsy was held and this hat pin (exhibiting pin 5 1-2 inches long) was found in the stomach, head downward and point extending up the esophagus into the left lung, prodding it with every movement of the child. The reason the pin was not discovered by the X-rays was partially due to weakness of the apparatus and partly because the pin was in the shadow of the vertebræ. The pin is rusty. The boy might have been saved by an operation, or possibly taking some drug which would oxydize the iron.—T. L. Hazard, M.D.

What Cures?

Most lobar or common pneumonias are caused by infection, and respond to the indicated remedy just as well as cases due to other causes. The remedy works just as well and in the same way in one class as it does in the other. In my judgment, the cure is effected in all cases by bringing the system up to a point where nature can throw off the acting causes and overcome the effects of the disease. The

drug does not cure the disease, strictly speaking, at most it only aids nature, by stimulating and strengthening the cells of the tissues, so that she can correct the functional and organic derangements in the tissues and organs which constitute the disease. Any influence will accomplish the same result, be it mental or medical, if it help or enables nature to overcome the causes and throw off the effects of the disease. However, we undoubtedly make too little use of microscopic examinations in our cases of pneumonia, as well as in other diseases, in that we often fail to examine the sputa, blood and urine which afford much information as to the origin, intensity and peculiarities of the disease. The sputa furnishes positive proof as to the character of the infection; the blood gives data as to the diagnosis and prognosis, though the blood-picture under the microscope and the degree and character of the leucocytosis, and the urine marks the progress of the disease and points to its probable termination.

Scientific medicine demands careful, intelligent investigations of all the data which bear upon the cause, course and cure of disease, and it hardly requires saying that the better we understand our cases in these respects the better we shall be able to select the remedies and cure for them.—A. C. Halphide, M.D.

External Warmth.

The proper time to cure pneumonia is in the first stage—at its beginning. The doctrine applies, indeed, to many other diseases. Get the best of it at the beginning. The amount of intensity of the hyperemia, and the intensity of the lung congestion at the beginning have much influence in determining the extent of tensity and the subsequent exudation. The more we can keep down the intensity of the first stage, the less difficulty we shall have in combating the subsequent stages. I am, therefore, always watchful that the patient's extremities at this stage be kept warm; and caution the patient's friends to examine the toes, heels and ankles and the knees and hands, which in many instances are found to be extremely cold. I insist on the application of heat externally, not of hot bricks or hot irons or hot bottles (these are inefficient at best), but hot water applied directly to the skin. The patient should not be lifted from the bed, or set up, but it should be applied while the patient is lying down. Cloths are wrung out of hot water in which there is an abundance of mustard. The mustard is used because its presence in the pores of the skin will maintain the glow and

prevent subsequent cooling. I also use the mustard jacket to aid in keeping the blood at the surface of the chest walls, as well as to mitigate the pain attendant on the act of inspiration.—Pemberton Dudley, M.D.

Treat the Man, Not the Disease.

I believe there should be a foundation laid that has not been given in any of the papers; and that is the rule that a healthy person, man or woman, who has pneumonia, will get well with very little medicine, and very little local application, except that physiological rest which is so necessary.

I want you to treat these from a mechanical standpoint in any way you may please. You will find complications arising that can be accounted for from a great many different standpoints, and I believe you will find fewer complications in the treatment of these cases if you will recognize the fact that you have something to deal with besides pneumonia as a name. You must study the natural course of the disease, the failure of the heart sounds or the rapidity of the heart sounds will be another indication for your treatment; and so you may go through the entire category, but in every case you must treat the individual independent of the inflammation, wherever it may be located.

I believe another thing might be criticised very severely, and that is that we do overtreat instead of undertreat our sick; that we watch for things or anticipate things, or assume responsibilities of nature, and by so doing, get many complications that otherwise would not exist. H. W. Pierson, M.D.

Catarrhal Pneumonia vs. True Lobar Pneumonia.

The first thing to do is to differentiate catarrhal pneumonia from true lobar pneumonia. Catarrhal pneumonia commences with a cold with the disease travelling down as a bronchitis, and finally pneumonia following it. Pleuro-pneumonia, true pneumonia, begins always with a chill; and then we have a complicated case. The inflammation of the lungs, and liver, if on the right side (lower lobe), or on the left side it may involve the heart and pleura, making a more complicated disease.

We know that the remedies for the different stages of these two diseases are different. The remedies for the typical stages of lobar pneumonia are aconite, bryonia, and phosphorus. The cases where phosphorus alone has cured were lobular or catarrhal pneumonia

If we have much inflammation down in the region of the diaphragm we cannot put much food in the stomach without having the heart and circulation disturbed by pressure and the evolution of gases; and therefore the systemic attention given to the heart necessitates a considerable drain from other parts of the body. As nourishment I prefer beef extract—albuminous food—and little of that. I think one great danger is the chilling of the surface and increasing the inflammation from exposure necessary in changing a poultice or other application. We can use the hot water bottle outside of the clothing.—T. C. Duncan, M.D.

Homeopathic and Allopathic Principle.

In treating pneumonia, the principles upon which our therapeutics are based are the homeopathic principle and the allopathic principle. This fact has been brought out here to-day. The poultice illustrates the application of allopathy. Some circumstances would justify treatment in this way. I do not use the poultice, however, but I would not throw it into the swill barrel. I believe in some cases it is a fine thing. However, in cases requiring revulsive means I use Stokes' liniment—egg and turpentine—until the acute condition is over; then I do not use it any longer. This is distinctly a Baltimore remedy. It is applied on cotton or flannel under the oiled-silk jacket merely for temporary relief. You do not have a chill resulting, which sometimes occurs from the poultice. I do not think the functions of the skin are interfered with to any great extent by the use of Stokes' liniment, because the skin is already hot and dry and its secretory and excretory functions are suspended.—E. C. Price, M.D.

Stimulants Hypodermically; and Poultices.

In regard to heart stimulants I have used those which have been mentioned here, but seldom use them. I have had a few cases in which I felt myself forced to the use of these remedies; but I used them hypodermically, but it was because I could not give relief by mouth. I think they have their place and should be used in a minimum number of cases. If we take care to select our remedies in the beginning, we will have less trouble in heart complications, unless it is those cases which are naturally troubled in that way.

I began my practice with free use of the poultice, and was so educated in a homeopathic college. I have seen no reason to

change my plan. I can say that in regard to the effect of poultices they are uniformly acceptable to the patient. I have had no experience with the use of ice. Local applications I have uniformly used with the bandage.—S. P. Hedges, M.D.

No Stimulants.

Within the last week I have had a case of pneumonia terminate in the crisis that was interesting. A girl of thirteen had been sick three or four days; temperature not high; I used hot applications and fixed the chest by putting bandages around it. About six o'clock was sent for, the child having a severe hemorrhage. At 7.30 the temperature was 104.3 and the pulse between 120 and 140. Instructed the nurse to watch for the hemorrhages and note the pulse closely. I expected to be called in in a few hours and became quite anxious, and went down next morning to see the patient; found temperature to be 97.3, a drop of seven degrees in twelve hours; and pulse 84. In this case no whiskey was given, and Thursday evening I left the patient in a very good condition. I believe that once in a while we can use whiskey; but I do not believe we can get a good deal of benefit from stimulants.—Geo. Riley, M.D.

Absorbent Cotton for Poultices.

In regard to poultices I would like to say that moisture tends to relieve that high temperature. If you do not like the wet flax-seed and are worried lest it harbor microbes when the dry meal was recently wet with boiling water, you may use clean towels or absorbent cotton wet with clean water, changed as often as it becomes dry. That does not increase the inflammation at all. It lowers the temperature in the breast and relieves the fever there instead of increasing inflammation. You might relieve the pus in an abscess by frequent applications of hot water; it would certainly relieve the pain. The same could be done in the chest with mustard plaster for a short time and relieve the pain, which I think is much safer than morphia.—F. J. Boutin, M.D.

Three Thousand Cases in Twenty Years.

I saw over 3,000 cases of pneumonia in the Mississippi Valley where I practiced for twenty years. There were 10,000 persons working in the factories, and these were strong, vigorous men. They were overheated, and location was such that the wind, blowing

could not have been put on the balls on each side of the groin would give these men a chill, and but for something was done immediately we had on our hands a case of the first stage of pneumonia. We instructed our men that they must not go out of the ship without putting on heavy clothing, and keeping their wrists, ankles and neck well protected. After the exposure we kept these parts warm by hot water application to equalize the circulation and bring about a healthy reaction and nip the attack in the bud.—C. B. Kinyon, M.D.

No Alcohol.

In the Southwest we had a good deal of pneumonia, and it is not limited to the catarrhal variety either, but I have not seen any benefit derived from the use of alcohol. On the contrary, I have seen harm and have regretted that it was used. It is like whipping a tired horse when he already has a full load.

In regard to the poultice, it has no proper place in the treatment of pneumonia. Why? Because in pneumonia, more than in any other disease, we need the respiratory function of the skin. We all know that the respiratory function amounts to about 20 per cent of that of the lungs. We cannot get all of this if the chest is partially covered with a poultice. Strapping is valuable in pronounced pleurisy, but without pleurisy I cannot see where any benefit can be expected from it.—C. E. Fisher, M.D.

Examine the Heart.

In the case of a weak heart, I have never seen the following idea suggested; it applies not only in the case of pneumonic weak heart, but in the examination of all cases of heart disease. Have the patient fully inflate the lungs, and then as fully empty them by forcible exhalation. In this partially collapsed condition the heart is brought nearer to the examiner's ear, and sounds which ordinarily are indistinct become clear and definite. The patient may not always find it easy to accomplish this feat in pneumonia, but under ordinary circumstances it can be readily accomplished, and is often a great aid to the diagnostician.—F. C. Price, M.D.

No Poultices.

The best place for the poultice is in the swill barrel. It will make the cows give more milk. Poultices have done more damage than the knife has been able to correct. If you are

going to put on something that will take the place of the poultice, which only furnishes heat and moisture, use absorbent cotton, and dip it in hot water. The poultice in my estimation is a dangerous thing to use for the simple reason that it gives more aggravation than it has ever done good. Let the poultice become cold and it is like a cold pancake and disagreeable to all connected with it.—C. E. Walton, M.D.

Poultices are Bad.

I want to add my experience to what Dr. Walton and Dr. Fisher have said in regard to the treatment of pneumonia; and perhaps I may advance something that you may have heard somewhere else, "For heaven's sake, let us stop treating pneumonia, and treat patients." The poultice I would not place in the swill barrel, but I would put it on the meddlesome nurse or meddlesome friends. It will do the patient more good. If we have an inflammation of the mammary glands, the more you put on the poultice the more you hasten the suppuration; just the thing you are trying to prevent. It is the worst thing you can do. Let the skin alone and keep it open. Let the lungs do their work. They need all the help they can get.—H. C. Allen, M.D.

Do Not use Opiates.

Keep above temptation. Don't use morphia or any of the new drugs for the alleviation of pain, because the result will certainly be disastrous. We have had many examples of this in Washington. Public men, who from their habits are intolerant of pain, or of delay in its relief, have fallen victims to the so-called rational method. Many physicians yield to their entreaties, and the result is either immediately fatal because of heart failure, or the symptoms are so covered that, it being impossible to make a careful prescription, the disease runs its course unchanged, proving that the physician or attendant in that particular case, has been a useless member of the family.—J. B. Gregg Custis, M.D.

Little Croupous Pneumonia in Minnesota.

Up in Minnesota, where we live in the frigid zone, we have clear, fresh, pure air, and very little pneumonia; that is, very little croupous pneumonia. I have seen comparatively little confirmation of and cannot believe in, the modern bacteriological origin of pneumonia. It seems to me that the older views

of the causes of pneumonia must be correct. I have never had to go outside of homeopathic remedies to cure pneumonia; the simple remedies, and the poultices have always answered my purpose. I certainly believe in poultices and, latterly, the cotton jacket, and find them entirely satisfactory.—W. E. Leonard, M.D.

The Meddlesome Aunt.

I have listened to these papers with a great deal of interest and profit, but nothing at all has been said of women having pneumonia; and since I do not deal with men when they are ill, I do not see why I am called upon to say anything. I had some little experience with one subject brought out in the last paper; many years ago when I was first called in consultation in a very bad case of croup, I said, "You are doing very well, but there is a troublesome aunt around, and I tell you, you must keep that old woman away and apply hot applications to her throat every ten minutes for twenty-four hours, and that will keep her still."—R. Ludlam, M.D.

Pil. No. 50.

The Pacific Coast Journal of Homeopathy.

It is evident that the use of the term "homeopathic" in connection with medicine and surgery warrants the presumption that colleges in the habit of using the phrase on the very face of each diploma issued by them limit their instruction, theoretical and practical, to the field covered by the adjective employed, or at best give instruction outside of this field in only a half-hearted, possibly slipshod, manner. * * * * *

Nevertheless, all this being true, a diploma is finally issued, the face of which warrants the presumption that the college issuing the valuable document is engaged practically in teaching "homeopathic" medicine and "homeopathic" surgery, whatever that may be, and the authorities are blamed if they take it for granted that the diploma means what it says, specifically or by implication. * * * *

We humbly submit that there is not a "homeopathic" medical college but devotes, and must devote, eighty per cent of its course of study to work which has nothing whatever to do with the question of Homeopathy or non-Homeopathy; and if such is the case, then any name or figure of speech or form of language which justifies the presumption that

the reverse is the case amounts to little more than a delusion and a snare, a means of creating a false impression so far as the people are concerned, and a procedure by means of which the holder of the diploma only too often is placed in a position which does him injustice and which may materially retard well merited advancement and official recognition. Editorial Chat.

[What does this mean, Brer. Arndt? Is it that we shall drop the word "Homeopathy" from our title and diploma in order that our graduates may not be blocked in their effort to break into the army and navy and other government fat places? But the excerpt is eloquent also of what we have been contending for a long time, namely, that "there is not a 'homeopathic' medical college but devotes, and must devote, eighty per cent of its course of study to work which has nothing whatever to do with the question of Homeopathy, or non-Homeopathy." Isn't that just what we have been saying—that the student, going to some of our "homeopathic" colleges, learns everything except Homeopathy? Wouldn't it be in the interests of Homeopathy to introduce as a prime and obligatory study into some of our "Homeopathic" colleges a knowledge of Homeopathy? But so long as only twenty per cent of the study is homeopathic (heaven save the mark!) it is little wonder that so many modern students graduate with no knowledge of homeopathy whatsoever. Is it little wonder that the Old School point to us and say we are not Homeopaths, but only trading on the name for a mercenary purpose? And yet, poor outraged fellows, these deluded graduates, they are hideously bound to an exploded system of therapeutics (of a knowledge of which they are truly innocent) because the college in which they were graduated and whose diploma testifies to their so graduating says they were homeopathically graduated. Certainly, Brer. Arndt is right. Where there is but a trace of homeopathy in some of the homeopathic colleges and that only as a perfunctory business-catch, and which, the same, serves to keep the itching fingers of the sous-allopath out of the governmental flesh pots—by all means let them paint the word "Homeopathy" out of the black-and-gold sign over the front of the building, and blot it out in the diploma. Then the world will know the college and the graduates at their true value. Then the modern allopathic understudy may increase boldly its allopathic and electric

studies from eighty per cent to a full one hundred!

Pharm. Centralhalle.

There have been offered vehicles for the administration of iron which were too nauseous to be retained by the patient, or with other objectionable features, and again some like the play of Hamlet given with the essential character omitted. The nutrient Somatose has already won its most favorable position, and now Dr. Eichengrün has succeeded in preparing a compound of iron with Somatose, which fulfills the requisites of ready solubility, tastelessness, and firm combination of iron. This is known as the Ferro-Somatose of the Farbenfabriken vorm. Friedr. Bayer & Co., Elberfeld.

In view of the excellent results which in recent years have been derived from the use of Somatose in the treatment of anemia, it seemed advantageous to produce an organic iron combination therewith, since there was some reason to believe that a form of combination of iron with a so readily assimilable albuminous body, would be absorbed with especial facility, and, like Somatose, would exert a favorable influence upon the digestive tract.

Ferro-Somatose is a light-brown, fine powder, which is readily soluble in watery fluids. Its solution is best effected by sprinkling the powder by means of a fine and dry wire sieve upon the slightly heated fluid. The solution does not resemble an iron preparation, either in its taste or odor, does not blacken the teeth, and has no action upon the stomach walls, even during prolonged use for a number of weeks. It is not precipitated by means of ammonia, alkaline carbonates, and strongly diluted acids. It is not coagulated by heating, and does not give a precipitate with albumin. In brief, it behaves exactly like ordinary Somatose, and in consequence of this, can be administered with any article of food. Its proportion of iron amounts exactly to 2 per cent.

Inasmuch as small quantities of Ferro-Somatose are completely utilized by the organism, it is advisable to administer it frequently in small doses, the size of which will depend upon the age and constitution of the patients and the nature of the disease. In children it is best to begin with 0.5 gm. daily in divided doses at meal times, and increase slowly up to a quantity of 3.0 gm. daily.

Attention is directed here to the remarkable

effect in stimulating the appetite which is often accompanied with a surprisingly rapid increase of weight. In the majority of cases, the patients have gained two kilos, within the first few weeks.

Before offering this preparation for clinical experimentation, it has been tried in a large number of cases of anemia, in which it was always exceptionally well tolerated. In no case were any disturbances of the digestive apparatus experienced; on the contrary, instead of constipation, a slightly laxative influence, which was always agreeable, was observed. Regular determinations of the hemoglobine were made with the hemometer of Fleischl, which showed a rapid increase of the quantity of hemoglobine.

Many cases in which it was tested improved rapidly and considerably as regards nutrition and the state of blood, and it is evident that Ferro-Somatose combines the well recognized nutrient properties of Somatose with those of a good iron preparation in an efficient manner.

The Literary Digest.

Too Much Fraternity.—Has the Christian Endeavor passed its youth? This question is discussed by The Western Christian Advocate (Methodist Episcopal, Cincinnati). It maintains "that there must come a time when reaction from excessive fraternity will set in." While it believes as strongly as ever that Christianity and fraternity are inseparable, it is persuaded that "a fraternity that tends to break down and obliterate all denominational lines is excessive and pernicious." The Advocate then speaks of the good and also the harm that has been done by the Young Men's Christian Association. For a time it contributed to fraternal feeling and Christian co-operation. Christians were brought together and learned to love and respect one another. But in the reaction from narrowness some were carried to the other extreme. It proceeds:

"In their devotion to union services and un-denominational enterprises, they almost forgot their first duties to their respective churches. They expended all their energies upon the Young Men's Christian Association, and had left only lassitude and weariness. Quickly all such became cumberers of the ground. The Young Men's Christian Association afforded good opportunities to exercise gifts and graces which were fed by earnest devotion to the regular ordinances of God's

house. These neglected, the former speedily withered."

The United Presbyterian (Pittsburg) quotes some of the opinions given above, and adds its own approving comment as follows:

"Inconsistent fraternity is 'excessive fraternity.' There cannot be too much brotherly love between brethren of different denominations. There should be sincere and hearty co-operation between them in so far as they can honestly and consistently work and worship together. But in no circumstances should there be any yielding of honest convictions, or any unfaithfulness to vows and promises, in meeting the demands of conventional comity, or in responding to the requirements of a fictitious charity. The man who loves all churches equally has no genuine love for any one. The man who can worship in one denomination as well as in another would not feel it a great privation to be left without any. The man who insists that one's life may be right, though his creed is wrong, does not have in mind the words, 'If any man will do his will, he shall know of the doctrine.'"

[If this be true, and who can deny it, why does it not apply with equal force to the Kansas triune? That body of physicians who proposed each to the other that they would cease to be homeopaths and allopaths and eclectics, and thenceforth be only "Physicians."]

Does it not also apply to that class of practitioners in our ranks who are willing to cast off the name Homeopathy—which the old school claim is objectionable to it—break down the barriers between the schools, take the good that is in each, and, thenceforth, be simply "Physicians"?

Does it not apply with yet greater force to that handful of has-been teachers who, by their indifferent and shifty teaching, have brought disloyalty to our school, so that the modern homeopath is a homeopath mainly by virtue of the title of his alma mater and in no other way?

This has been our position from the first: that the allopath and the homeopath can never lie down together in peace and unity. If the one is right the other is wrong. If there is nothing to fight for so neither will there be rivalry to expand and do better each in his own school. Amalgamation is monopoly; and monopoly is death to individual effort. With but one store in the village, there is no business. With but one political party, or one

religion, or one medicine, that party or that religion or that medicine ceases to exist.

Suppose, therefore, we stop preaching the medical millenium, the sleeping in the same bed with the allopath, the drinking out of the same canteen with other divisions of medicine.

Let us look more carefully to the "Medical Side" of our colleges and see if we cannot add improvement there—not by throwing out the little of Homeopathy that yet remains therein, but—by adding greater efficiency and giving more vitality to it. Call off the Surgical Side for a few years until the Medical Side has caught up; then combine the two and make Homeopathy the Medicine of the Age. Not as a mongrel combination, but as a system of itself.]

The Medical Register.

There can be no doubt of the fact that, properly taught, physiology and hygiene are among the most important branches of instruction in our public schools, serving not only as mental training but filling also the more important role of imparting to pupils a knowledge of the human system and removing ignorance as an excuse for abuses of its functions. Unfortunately, the advantages which would be gained by the proper teaching of these branches are not secured to any great extent by the methods now in vogue, and the first difficulty lies in the text-book. This is not to be wondered at when it is remembered that the prime idea in selecting these books is usually to impress upon pupils an exaggerated and terrifying conception of the injurious effects of alcoholic beverages and tobacco, and that a brief but imperfect description is given of the structure and functions of the body only with the view of showing how they are injured by these destroyers of mental, moral, and physical well-being.

The text-book which teaches but little physiology (and that little inaccurately), but devotes much space to the consideration of the injurious effects of alcohol and tobacco and to reciting harrowing anecdotes of the ruin they have wrought, has a far better chance of being adopted in our public schools than has the accurate, carefully prepared book wherein real, though elementary, physiology is taught and the effects of alcohol and tobacco stated in their true terms. Where there is a demand for a product it will always be forthcoming, and hence a horde of writers have supplied the kind of books which meet the require-

ments of our educators as influenced by the W. C. T. U. No competent physiologist, possessing a love for the truth, can be found who would overstate the matters as required, and hence the text-books are written by individuals of limited requirements along these lines. We do not for a moment wish to underestimate the injurious effect of spirituous liquors when taken to excess, nor to deny that there are many individuals who should not indulge in tobacco, but to make these topics the main theme in text-books of physiology and hygiene, and that at the expense of correct teaching, is altogether wrong.

[These paragraphs are quoted by the N. Y. Med. Jour. with approval.]

It begins to look very much as if the goody-goody folks whenever they interfere with professional work, whether in college, government, or in teaching in the public schools, or in advertising their Healing by Prayer, or Laying on of Hands, are being brought up standing by the better class of journals.

Right! The church is a noble institution, but it must stay in its own bailiwick. It has no business to meddle with the public school, any more than it has with a modern medical college.]



OBSTACLES TO HOMEOPATHIC PRACTICE.

T. C. DUNCAN, M.D., Chicago.

That word, Homeopathy, carries with it a wide meaning in a medical sense. Let us see.

I. To understand it one must know anatomy, both regional, visceral and minute; must know functions normal (physiology) as well as abnormal; must know diet and hygiene, whose violations develop disorder (disease); must know chemistry of body, soil, food, air, and the attending physical possibilities thereof.

II. These are fundamental to a thorough knowledge of all the diseases "flesh is heir to," with their complications and combinations met in all peoples and tongues—hereditary, national and climatic.

III. Now comes the problem of cure; but before that, should be learned what surgery, diet, hygiene, and medicines will do, to say nothing of mental suggestion or diversion and manual and mechanical manipulations. Each has its curative range.

IV. Medicines must be tested alone in as healthy bodies as can be found. Their effects must be as scientific and as elaborately developed as are disease manifestations.

V. Homeopathos, or similia similibus curantur, implies the ability to select a drug that will bring the diseased body to health, or at least start it toward health, to be succeeded possibly by the use of other drugs that will gradually restore the diseased or much diseased body to its norm.

VI. The homeopathic physician is expected to know the natural history of all diseases and all their possible complications, combinations, etc. Where, my dear editor or reader, can the inquiring physician find such a disease analysis? Our works on practice are modeled upon a different basis. Here is ONE of the obstacles to exact practice according to similia.

VII. Hahnemann appreciated this, hence he arranged his provings not nosologically but anatomically. That is all right, perhaps, but where do we find the course of action of a drug given? Of course, he had learned all about each drug he proved, so that he knew just how its symptoms appeared, one after another. He left the labels on many of the symptoms (as to time, etc.), so that the scattered effects could be rearranged in a consequential whole. In what work do we now so find them? Here is the SECOND obstacle to practice.

VIII. The homeopathic physician is supposed to study the diseased bodies as they appear. He must know what disorders are to be removed by mechanical, mental or surgical methods, and what train of symptoms alone are to be removed by the similar acting drugs. He has a quiver full. He is directed to fire at the last symptoms. He knows that he can "hit" with a dozen drugs, but which is the most similar, for, according to the law, that one, most speedily cures. He must know, also, the limit of drug action. Is it any wonder that (1) because of a lack of clinical history of cases of diseases, and (2) because of a lack of the knowledge of the course of development of drug effects, he makes many wild shots? What is the remedy?

The Organon is a book of directions and explanations, but where are the guide books for the willing and inquiring student of homeopathic therapeutics? Here, I am persuaded, is the stumbling block to homeopathic practice.

Our teachers and preachers on *Materia Medica* have not helped as they should. The multiplication of books has not solved these difficulties. Revision may do, if revised aright. Rearrangement seems more necessary.

Globules.

We are looking with much expectancy to the meeting of the Southern Homeopathic Medical Association, under the guidance of Dr. Gutherz, its able president. We feel that it will be a grand one and redound in much good to the South.

The next monthly meeting of the Cleveland Homeopathic Society will be held in the building of the Cleveland Medical Library Association.

The Cleveland Homeopathic Medical College was opened in due form a week ago with a large and enthusiastic class. Every prospect a successful term.

Dr. W. E. Schoonover, of Drs. Miller & Schoonover, Greenville, Pa., has written us an interesting letter, parts of which we will print in our next issue.

The Denver Critique says there are in the United States 5,427,767 bachelors, against 3,224,494 old maids; and that there are nearly three times as many widows as widowers, the figures being 2,154,635 widows to 815,437 widowers.

The Palmar Arch, a society composed of Cleveland medical men not connected with the colleges, had a meeting and banquet recently in which a large number of the local profession took part. Dr. Biggar, one of the banquet speakers, in some eloquent passages, deprecated the lack of determination in some of the schools to improve the teaching.

The old school objects to the appellation of "Allopath"; and yet no user of the word among the homeopaths has any thought of ridiculing or belittling the old school in using the word. To call them "Regulars" under the definition attached to that word, is manifestly not only improper but untrue. In England and on the continent of Europe we learned that the word "Yankee" applied to an American is considered a term of deep reproach. Yet in America the word "Yankee" has no such meaning. Again, the English brethren have a nasty way of referring to us as coming from the "States," instead of from the "United States." Here also no harm is done; though we Americans do not like the abbreviation.

Yes, by all means, let us have a revival of the Medical Side of our colleges as well as of our hospitals, of our professors as well as of our practitioners. (Thanks to Brer. Talbot for the suggestion.)

Dr. C. E. Fisher, of the Medical Century, has gone to Europe for a two months' absence. Bon voyage! Look out for a portfolio filled with interesting matter when Fisher comes back.

Dr. Samuel A. Jones, or some one for him, in the Clinical Reporter, denies that he is about to go over to the allopaths. And the denial is so well couched in such clear and unmistakable vernacular, that we could almost swear it had the earmarks of Dr. Jones.

Where, oh where is our President-elect of the American Institute? Haven't heard a word from him, or seen the same in any of the journals since the election. Here's to you, Brer. Bailey, and let us see the light of your pen more frequently.

Dr. M. A. Kapp, of Akron, Ohio, visited Cleveland recently in relation to the placing of a patient in a local sanitarium. Dr. Kapp is becoming more and more enthusiastic, as the years go by, on the all-importance of a good knowledge of materia medica.

The Allison Chair is the equal of any in the market. It is not a heavy iron machine with all the many unnecessary positions so often advertised. Yet it is complete for any office or surgery.

Why not, gentlemen and ladies of the several bureaus in your state societies, resolve that your next paper will be written with an eye singled to the Medical Side of the profession? Try it and see what a wonderful step to the front of the medical column it would prove to homeopathic medicine.

If, in 1900, when we are ready to make our Homeopathic pilgrimage to Paris, we find that the New York steamers own not only the whole unboundless sea but as well both shores thereof, and will not "dicker" with any one, why not consider the advisability of taking the Montreal route—same as our former (1896) party did? Sometimes the shortest way home is the farthest way round.

Harpers Monthl^y has a very good serial story entitled "An Angel in a Web." It has all its usual grist of good literature.

The Cincinnati Lyceum has issued its program for the '97-8 season. It is filled with fine papers. Dr. Laura C. Brickley is secretary.

The N. Y. Med. Times quotes Dr. L. D. Buckley, who prescribes ichthyol by the mouth, ten to fifteen drops in capsules, three times a day, as almost a specific in hemorrhoids.

The fifty-first semi-annual meeting of the Homeopathic Medical Society of Eastern Ohio will be held in the Assembly Rooms, City Hall, Canton, Ohio, Oct. 19, 1898.

The second edition of Norton's "Ophthalmic Diseases" has reached us from the publishers. It is a much better and more complete book than its first edition. It is graphic and homeopathic. We expect to review it shortly.

You must educate them (students) in homeopathy to make homeopaths of them, and not stuff them full of nonsense from the other schools. If one is right the other is wrong. If a man is strictly honest he cannot practice both schools of medicine. No man of that kind is any good to us, and he is a detriment to the other school.—Dr. Coggs-well, Denver Critique.

A number of eminent men of the Institute, who certainly know better, have failed to return the manuscript of their impromptu speeches delivered in the Sections of the American Institute. This is not fair to those who have charge of the publication of the Transactions. Send them now to Dr. Porter, 181 W. 73, New York.

One of the pet superstitions of the laity, especially of the no-brandy-in-mince-pies laity, is that the physician who prescribes alcoholic liquors in his practice is the father of untold evil, in that he spreads the seeds of alcoholism, and, argal, many families of promising youth and adults have been swept into drunkards' graves because of this medical culpability. This is, it may be added, usually laid at the door of the allopath, and very rarely to the

homeopath, and for obvious reasons. Dr. Norman Kerr, the well-known authority on schools and temperance of London, who has studied the subject, denies this claim, and after much research has not been able to trace such a cause in more than one-half of one per cent. How many of our readers know of even a single case where the doctor's prescription has produced incurable drunkenness.

Lippincott's for October has "The Confessions of an Aide-de-Camp" for its first and complete story; and the usual grist of interesting smaller stories. The Confessions are somewhat tiresome from the fact that so few characters are involved. Yet it is well written and the denouement very masterly. The usual funny pictures at the back are always fetching. Nothing dry or weary in Lippincott at any time.

It is cause for no little wonder that a number of first-class surgeons of the Homeopathic school permit a certain arrant advertising sheet to parade their names as particeps criminis. Gentlemen, wake up, and have some style about you! It's precious little reputation your name will get by being hoist at the top of a pirate ship.

Let us have more Homeopathy and less good-lord-good-devil allopathy. Tackle that student of yours who was graduated last March, Mr. Preceptor, and quiz him on his Homeopathy, and mark well whether he knows as much as you do—and you didn't have all the modern advantages of a present-day student. Let that examination show you the value of his Alma Mater.

Century Magazine for October has a fine paper on "Knotty Problems of the Philippines." The "Pony Express" is another interesting and well illustrated paper. Elizabeth Robins Pennell contributes a story well pictured: "The Oxford and Cambridge Race." A remnant of the late war between the States is the paper entitled "The Blockade of the Confederacy." A number of other interesting stories are to be found in this issue.

The American Homeopathist.

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The American Homeopathist.

NEW YORK, NOVEMBER 1, 1898.

FRANK KRAFT, M.D., EDITOR, CLEVELAND, OHIO.

OUR PORTRAITS.



H. D. HANDY, M.D.,
Brockton, Mass.

Have just heard of another doctor throwing up general work, deserting the Medical Side of the profession, and going to Europe for three months, then to return and resume work as a mechanical specialist.

Brethren and Students, this is a large and grievous mistake. Surgery and gynecology, and all its allied specialities will one day be-

come so common, so easy of acquisition, because in the main mechanical, and because too many first-hand carpet-knight specialists are being manufactured direct by the homeopathic colleges, that they will be no longer attractive.

It is indeed pleasant to contemplate the ease and comfort of a specialist with a downtown office and only three or four office hours, making no midnight calls in the rain or snow, making none except in his day-light convenience and these only for a big fee. But this is no longer a fact. Not all, nay, not even half of the operations you hear about or see in print are pay cases. There are very few \$200 operations to-day.

When every student from a homeopathic college to-day knows more of surgery than of the Organon and is graduated a specialist de novo, with a bare tolerance for that old exploded notion of medicine curing anything how long must we wait until there will be a surfeit and the price go down, down, down, so that even the real specialists, those who grew up out of the ranks, have to go back into general practice for a living—several instances of the latter being already a painful fact.

Besides all this, the laity are no longer in the "cutting" mood. It is rapidly ceasing to be the fad to have no ovaries or appendix. Ordinary folks are again having "stomach"-aches and are no longer afraid of grape-seeds and collar buttons. People are growing timorous about calling a man to the family-side who has the reputation of several hundred ovariectomies and the like at his back. Study Medicine, the Medical Side of it—and Homeopathy at that—ladies and gentlemen of the profession! The Reign of Blood is about over.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighty-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Veratrum alb. in Neuralgia Facialis.

A man of thirty years, lean, of large stature, had suffered from violent tearing pains in his whole head, concentrating themselves in the left side of the head. During the past six nights they had been so violent that he had been unable to sleep. He appeared to suffer much, with no signs pointing toward either the eye or ear. It was disagreeable to open the eyelids in the dark; the pains so violently tearing that nothing can be obtained as to their nature. As soon as he goes to bed he breaks out into a profuse sweat over his whole body. *Veratr. alb.* 3x, fifteen drops in a wineglassful of water every hour and a half teaspoonful, and later every hour, was given. After having taken a few doses he felt easier. That night he went to bed fearing the fearful sweat, but it did not reappear, and he slept excellently the whole night, and woke the next day with a dull pain in the eye-region, which, with continued use of the remedy, gradually left him. A weakness of the eye remained for some time.

Arnica montana in Acute Tonsillitis—Quinsy.

Dr. M. A. Wesner⁷² claims that arnica will abort cases of quinsy when indicated by the following symptoms: Severe pain when swallowing which extends to one or both ears; unable to swallow solid food; swallow large quantities of liquid with more ease than a small quantity but either is extremely painful. Mouth opens with difficulty; swelling and tenderness at outside of neck; one or both tonsils largely swollen and of a light red color; swelling has a puffy appearance and extends upward and forward involving the soft palate and the uvula which are also light red. In addition the patient is chilly; has fever; thirst; his voice is husky and indistinct; is unable to lie down in most instances; has soreness of muscles and a feeling of general malaise. Pay particular attention to the character of the swelling—its light red color, its puffiness and its general direction.

Here is one of Dr. Wesner's cases, corroborating his claim:

I was called to see Mr. H., Feb. 8, 1898, aged thirty-five years. His temperature was 102°; he was chilly; thirsty; unable to lie down or sleep; had swelling and tenderness at right side of neck. His right tonsil was light red and so enormously swollen that it reached across to its fellow on the opposite side. Soft palate and uvula were also swollen and of same color. Uvula was about as thick as an ordinary man's thumb. All had a puffy appearance. He was unable to swallow solid food or a small quantity of liquid, but with great effort he occasionally succeeded in getting down large quantities of liquid. I gave him *arnica* 6x., in water every hour. Upon my arrival next day my patient's temperature was normal, and he had been able to lie down and sleep part of the night. His right tonsil was about one-half reduced and swelling of uvula and soft palate had all disappeared. All symptoms of quinsy left in two days without suppuration.

Ars. jod. in Meningitis—Tubercular (?)

Dr. J. Martin Clark³ says: A regular physician called me in consultation over the case of a male child two years of age. The doctor related how the prodroma appeared as gastric fever, but were quickly followed by what seemed to be typho-pneumonia. After two weeks this abated and cerebral symptoms developed to such an extent as to warrant the diagnosis of tuberculous meningitis, with an unfavorable prognosis.

The baby was the youngest of a large family of children, living in a dark, cramped flat on the third floor. The patient lay unconscious with the eyes partly closed, the globes rolled upward, and, if I remember correctly, lacking the corneal reflex. I do not now recall all the particulars of the case, but the conditions were grave enough to justify the attending physician's diagnosis. The one persistent and alarming symptom was what appeared to be cerebral vomiting. Suddenly, during the night, the little patient would arouse from stupor with an explosive emesis that was so severe as to alarm the friends, imminent collapse seeming near. It was owing to the frequency of these attacks that the doctor had despaired of remedial measures, as no medicine could be retained. This was also the reason why I was called upon to prescribe a homeopathic remedy. *Arsenicum jodatus* 3 was given every half hour. To my mind a striking feature in the former treatment was the protracted nursing. The mother had been permitted to do so

owing to the fact the child had not been weaned prior to its illness. I advised the immediate suspension of such feeding. The patient retained every dose of the medicine administered, and to the surprise of all, quit vomiting. Later, artificial feeding was instituted; convalescence was established, and recovery at last reached. I do not vouch for the accuracy of the diagnosis, but there is no doubt the remedy and the change of diet saved the child's life.

Eczematous Eruption produced by Atropine.

On August 9th, H. H., aged fifty-five, consulted me regarding defective vision in his left eye. On ophthalmoscopic examination a satisfactory view of the fundus oculi could not be obtained, so I instilled two or three drops of liq. atropine sulph. (B. P. 1885) and asked him to return the following evening for further examination. On his return he presented a curious condition. The left side of the nose, the left cheek, and the left half of the upper lip exhibited an acute eczematous condition. After the atropine had been instilled the tears had trickled down that side of the face, no doubt carrying some of the atropine with them, and within a few hours he complained to his wife of feeling a burning sensation all over the area subsequently affected. The treatment consisted in covering up the affected area with starch paste, to which a few grains of boric acid powder had been added, and in four or five days the condition had disappeared. Throughout the pulse and temperature remained normal, and the local condition was the only cause of complaint.

On further inquiry I find that he is very susceptible to the action of belladonna. Four months ago he sprained his right wrist, which was treated with a liniment containing belladonna, and this gave rise to a similar eruption all over the part. He is also subject to lumbago, which can be relieved by the application of a belladonna plaster, but the eruption caused by this is so bad that he declares the cure is worse than the disease.

During the last nine years I have used atropine almost daily, but never before have I met with a similar experience.—William Bryce, M.D.³

Melilotus in Nervous Headache.

Dr. H. V. Halbert³ reports the following case: Miss B——, a lady, thirty years of age,

occupation a position of considerable responsibility in a down town business office. Her general health was perfect, and she possessed unusual physical strength. Her exacting duties, however, began to tell upon her nervous resistance, and she complained of frequent frontal headaches; they generally occurred every Sunday as she attempted to recuperate from the hard work of the week. As nausea and vomiting were attendant symptoms and, inasmuch as the headache was usually located over the eyes, I expected results from such remedies as iris, nux vomica and pulsatilla; these, however, gave no relief. I tried to help her digestion with pepsin, nitro-muriatic acid, arsenicum, etc., but without result. She herself had tried many simple measures of this character and had been very abstemious in regard to her diet, only to become worse from day to day.

After another thorough examination the fact revealed itself to me that my case was one of nervous derangement and not of stomach disorder. Then it was that I easily found many of the cardinal symptoms of neurasthenia. I found that nosebleed was a frequent symptom and always gave her relief; she was also better during menstruation, which was quite profuse; there was always a violent facial and cerebral congestion with throbbing carotids, resembling very much the belladonna characteristics; the remedy gave no relief in any potency. Vertigo was a frequent symptom and vomiting often occurred when the headache was severe.

She felt worse from the slightest movement, but was always better in the open air. Mentally she manifested a similar exhaustion; her disposition, naturally an amiable one, became irascible and discontented; her memory failed her and she feared she could not hold her position.

After failing with several remedies I was greatly pleased with the result of melilotus. The third decimal potency was used, six times daily, for two weeks, without relief; but I was so sure of my remedy that I continued it with confidence; soon I was rewarded with a pronounced improvement. She has now taken it, intermittently, for four months and her recovery is perfect; she attends to her business with perfect freedom from nervous irritation and the headaches have not recurred. I have faith to believe that in such instances as this we shall always get good results from this remedy.

A CASE OF PLEURISY WITH EFFUSION.

JOHN McLACHLAN, M.D.,

Oxford, Eng.

About a fortnight after the visit of the Prince of Wales to Oxford (12th May) an unobtrusive came to me complaining about a pain in his back and right side, which was aggravated on breathing and moving, but not greatly affected by pressure. At first I put this down to his being in some of the many commotions that occurred during the Prince's visit. I knew that he had been in several fights that night—though he had the good fortune not to be "run in"—for the general principle of action on that evening seemed to be "wherever you see a head, hit it." My patient positively affirmed that though he was "squashed" once or twice, he was in no way hurt, and that it was nothing to what he frequently had to encounter in football matches. I ought to have believed him, but thinking it was merely the pain remaining after bruises of muscle, I gave him arnica, and later, as the arnica seemed to be useless I gave him Bryonia and one or two other medicines. This shows the fatal error of approaching a case with preconceived notions instead of examining it on its own merits. What I ought to have done was to have had him stripped and to have made a careful local examination. This went on for some days longer he getting no better; and at last the expression of his face struck me as peculiar and significant. It was drawn, haggard and sunken, and then I did what I ought to have done long before, asked him to strip, and examined his chest, when, much to my regret, I found the right pleural cavity full of fluid with a total loss of vocal fremitus as high as the spine of the scapula. I next took his temperature, and found that it was some degrees above normal. I do not wish to excuse myself, but who was to expect that a patient suffering from acute pleurisy, with effusion so marked, would be walking about pretty much in his usual way? I sent him home to bed, and on this date the temperature chart begins. I tried the usual remedies, e. g., bryonia, and as that seemed to do no good followed it up with sulph., but that was equally useless in ameliorating either the general or the local symptoms, the temperature continuing to rise steadily, and so far as I could make out, the fluid also. The fever was highest at 4 o'clock in the afternoon, and for this reason chiefly, as there seemed to be no other "guid-

ing symptoms," I gave lycop., but it was equally without benefit. I then looked up H. C. Allen's book on Intermittent Fever to find out what medicines had fever highest at 4 p. m., and amongst others I found the "fever without chill" returned at 3 to 4 p. m., and also stood in the second rank where it returned at 4 p. m. On consulting the *Materia Medica*, I found that it had a great affinity for "serous membranes," causing marked effusions (or at any rate curing them), and it agreed with the other symptoms fairly well. I at once gave apis 30, and it was very gratifying to see how promptly it acted, for as the temperature fell so did the level of the fluid, with a corresponding return to the vocal fremitus, though the dullness on percussion did not disappear with equal promptitude.

TWO AGENTS.

The office girl comes to our private door, saying that a doctor wishes to speak to us at the phone. An unknown voice says: "I am Dr. William Garrison Isenbart. Doctor, when can I see you for a few moments?" Answered that he may come any morning between certain hours—office hours, to be sure—but to a brother doctor always open for a few moments' talk. We don't know Dr. Isenbart; it may be some doctor from a nearby country town come up to the city with a consultation fee in his fob; or it may be some American Institute member from New York or San Francisco stopping off to see the Recording Secretary; or a possible subscriber to the *AMERICAN HOMEOPATHIST*. When Dr. William Garrison Isenbart appears at the appointed time he sends in a perfectly proper visiting card, the plate for which not presented by the allopathic druggist. He is asked to wait until the present patient is dismissed. That done, we find a very pleasant looking, well-dressed, be-spectacled gentleman in waiting. After making our excuses to the waiting room people the doctor is taken into the sanctum sanctorum, and there proves to be a travelling man for the Po-Dunk Pharmacal Co.!

On another morning as we were dismissing a patient we saw upon our reception room table a black Derby hat and peeping out of the hat a homeopathic doctor's ordinary pocket case. Looking around we noticed a quiet-looking gentleman in the corner of the room deeply immersed in the *Century maga-*

zine. We go over and speak to him. He says he is in no hurry; knows himself what it is to be busy in office hours. Will wait. We insist upon his coming in at once. The quiet-looking gentleman brings in his black Derby hat and his homeopathic pocket case. Once within the privacy of our rooms he opens the homeopathic medicine case and shows it filled with sample bottles containing specimens of what "our" malt preparations will do in certain phases of tubercular torticollis and corns.

There are a few other ways of getting into a busy doctor's private office, but these seem to be the latest. Neither of these men sold us anything. On the contrary, having deceived us we judge their wares by themselves. And it will be a very cold day when we will recommend what they sell.



A MAN

Who would the Institutes of Homeopathy teach must have an abiding faith in the truth of the Organon.

It does not include a damning with faint praise.

Nor the throwing of doubt and dirt on any part of it.

Nor in deriding the religious belief of Hahnemann.

Nor in pitying him and his dotage.

Nor in selecting a paragraph here and another one there

To teach the Institutes of Homeopathy.

A Man must himself believe in and practice the truths of the Organon.

A Man must be honest with himself before he can be honest with his class.

A Man who uses the dictionary only to find the bad words needs no dictionary.

A Man who says the Bible contains many beautiful thoughts, but also many exploded notions, had better leave the Bible alone.

A Man who says Hering's Condensed is a good book but filled with much rubbish, is not the proper teacher of Hering's Condensed.

A Man who says Hahnemann was the author of similia, but that his Organon contains many thomas-fool theories is not the most fit to teach the Organon.

A Man who derides the dynamic theory and says it is the child of Hahnemann's dotage ought to be made to step down and sit down for "keeps."

A Man who picks out paragraphs here and there in the Organon is no better than an allopath. Even the devil could find some unobjectionable passages in the Bible.

A Man should be fitted to teach the Institutes of Homeopathy and not be merely the one who drew the marked ballot from the faculty hat.

Put Organon believers in Organon chairs!
Who would fat oxen drive should himself be fat!



SOME OPINIONS ON ANTI-PATHY AND ALLO-PATHY.

Discussion, Bureau of Materia Medica, A. I. H., June, 1898, stenographically reported for this journal.

Pemberton Dudley, M.D.

I am almost afraid to attempt to speak on this subject because I find since coming here that I do not know what Anti-pathy is. The name originated with Hahnemann, just as did the terms Homeopathy and Allopathy; it was his method of defining a certain relation of the drug to the disease—a certain therapeutic relation. He speaks of three relations and hints at a fourth. I do not like to attempt to quote without having the book to support me, but Hahnemann claims there is a homeopathic relation, an antipathic relation, an isopathic relation and a so-called allopathic relation, which is not a relation at all but an absence of relation. The homeo-pathic relation is the similarity of drug to disease; anti-pathic the opposite; iso-pathic, the relation of the disease causing the relation, and allo-pathic, the absence of any relation, which, he said, was not worth considering at all. And that is why the allopath does not like it, and prefers to be known by almost any other name. I try to teach my students that it is rarely indeed that you can find the anti-pathic treatment of any disease. When you have to select a remedy from some relation between drug action and disease manifestation it is possible to suppose the existence of an opposite. But what is the opposite of pain? What is the opposite of a cough? What is the opposite of convulsions—of paralysis—of fever? You cannot imagine such a thing. You are met at the outset by the fact that the

application of anti-pathy is an impossibility; Hahnemann himself directs the attention to this fact. Take the cases cited here this afternoon; none of them is anti-pathic. The child has a fever and you have some evidence of irritation of stomach or bowels, so you give a cathartic; that is not anti-pathic, but merely removing the exciting cause, which Hahnemann says we shall always do. It is the proper thing to do, and which he did do; but there's no anti-pathy about it. Hahnemann says that when you have removed the exciting cause the disease will generally take care of itself, without medicine. Keep in mind the difference between recovery and cure. Preparing the way for recovery is not cure; the rendering of a recovery as possible is not a cure. Four things the doctor should know: (1) The properties of drugs; (2) the manifestations of curable disease; (3) the relationship between drug action and that of disease; and, (4) the removal of agencies in way of curing the disease. If the allopath has a case showing high temperature, he gives an antipyretic, but is he giving an opposite? Is emprostotonos the opposite of opisthotonos? Is a convergent squint the opposite of a divergent squint? The thing is not practicable. The citations we have had here I believe to be allo-pathic, all of them. I know they object to the name, but that is what they are, if what Hahnemann says about them be true. I believe that the best teacher is Hahnemann; he has taught us more than all the modern writers put together.

George F. Laidlaw, M.D.

The question, as formulated, is "Under what circumstances may the Homeopath resort to anti-pathy?" I should say under what circumstances must he so resort, for I have maintained that there are circumstances where he must honestly resort to anti-pathy to cure his patient. Dr. Dudley says he knows of no examples of anti-pathic treatment. There is a large class of disorders known as strictures. I know of a gentleman suffering from severe abdominal pain, with occasional diarrhea, who went to four or five good physicians and took their prescriptions, but without permanent relief; he went to an allopath, who gave him opium, but without good result. The introduction of a rubber bougie, followed by larger and larger sizes, cured him entirely; there was no more pain or distress. There was a certain condition and by the introduc-

tion of the bougie you antagonize that condition and cure the patient. Everyone can parallel this case in his own experience. It is the same with spasmodic stricture of the urethra, which may be cured by dilatation with the steel sound. This is anti-pathic treatment and we not only may, but must, resort to it. The error seems to me to date from the teaching in our colleges. I failed to get from my Homeopathic teachers, or to have pointed out to me, the difference between disease amenable to therapeutic treatment and that which needs mechanical treatment. The homeopathic remedy cannot discharge a large fecal impaction. If the muscles have passed the point where they fail to respond to our remedies, the patient will die if you do not help him. There would be no use in prescribing for the child with a cork in its trachea. Like the child which swallowed a hat pin and then wakened up with pneumonia. You must use mechanical remedies for mechanical cases. We were not broadly enough trained by the homeopaths who had us under their care. We are liable to fall under the suspicion that all homeopaths are formed on the same narrow basis." I call spasmodic stricture a disease, because if you break it up the case is cured.

James C. Wood, M.D.

It strikes me that some of us are carrying things too far in arguing whether convergent squint is the opposite of a divergent squint, which it is to a certain extent. I do not know where the next last speaker got his education, but if he will take a post-graduate course in the Cleveland College, we will teach him better. Yet, the gentleman has my heartfelt sympathy, as I went through the same process while wondering where I was at. The question is a broad one. I think we will all agree that the law of similia is the best one ever enunciated, or we should be inconsistent in remaining in this Association. I am unable to find in this or any other homeopathic association one jot or tittle to keep me as a physician from using anything or everything which is for the best interest of my patient. If I were restricted by this or any other organization, in any way, I should hand in my resignation at once. The question is, how are we to present this subject to our students in the best way? We should impress this fact upon them—we are first of all, physicians. Hahnemann taught that our first duty is to remove the cause, when possible. The better posted we are in the

homeopathic materia medica, the less often shall we have to resort to other expedients. But that there are certain mechanical or surgical diseases there can be no possible doubt, and we should impress this fact upon the minds of our students. There is nothing in homeopathy to keep the physician from using anything or everything which he deems for the best interest of the patient. Dr. Mitchell has said that we should take a strong stand on this matter and stick more closely to the homeopathic line. I believe that is true, but you cannot pound it into the mind of the broad and liberally educated student. You must impress upon him that homeopathy is more liberal than any other school; that we teach all of old school medicine; all the correlative sciences, and, in addition to all this, the homeopathic law of cure; that we teach all they do, and more.

T. L. Hazard, M.D.

There is a great difference in physicians as to ability to pick the homeopathic remedy. Some can choose the simillimum almost by intuition, but most of us are not blest with that miraculous ability to look upon human ills and drug affinities and successfully choose the remedy, but are compelled to go about it in a more laborious way. This ability, or lack of it, has much to do with our loyalty; it may be improved by education. When a homeopath treats allopathically it is not from lack on the part of homeopathy, but the lack is on the part of the prescriber. While many prescribe with seeming empiricism, they do so differently from the old school. They, the old school, usually consider the special disease in the case, while we choose that which in our hands has been most valuable in similar cases. To successfully select the simillimum we must place the name of the disease in the background. We can afford to work harder; it is not only our duty, but our privilege. Allopathy is an empirical system which is called "rational"; as far as the rational part is concerned, it is a comparative adjective, while homeopathy is in the superlative. The typical allopath is the Spaniard of medicine, and is as intolerant; and, although more civilized than one hundred years ago, he still tortures many who come within his power. After the fashion of Weyler, he wins many victories with the typewriter. Valiant are we to rise and say that we still live. Not like the sharpshooter of homeopathy; he seldom hits the

mark, and when he does, it is with a shotgun prescription. Inventive genius has for years endeavored to perfect a smokeless powder so that the soldiers might see the enemies fall; so has the allopath advanced from opium to antipyrine and salol, and with each advancement he sees more and more of his victims fall. He has heard of the ambition among men of war to invent a powder for loading cannon, by which the velocity of the projectile shall be much increased; probably for a like reason he adds croton oil to his compound cathartic pills. Who would be an allopath? Only he who has not heard of the virtue of homeopathy. There are some of us who might go among the enemy and use his arms, and escape unscathed, but the most of us would be poisoned. If there be any virtue in vaccination, would that we all might be inoculated with the hippocratic virus and then be free from this virulent disease, the decimators of mankind, the depopulators of the earth—the allopaths. If I could bring to view the countless men, women and children who have been hurried to the grave by morphine, acetanilid and other drugs, words would fail to express our astonishment.

E. B. Hooker, M.D.

As the papers presented at this Institute, and the discussion of the same, depend for their value very largely upon their being an honest expression of our practice and belief, and not upon a fine display of homeopathy or our loyalty thereto, I shall make a few remarks which may be exceeding unpopular and may fail to win your approval. But I shall speak to you as an absolutely honest man, and shall, from my experience, tell you what is my belief. Whether you differ or not, it will still be more valuable than anything which would glorify homeopathy, if it did not present the absolute and honest conviction of the one who presented it. I do not offer criticism, or suggest any lack of truth, on the part of any who have spoken. I believe in the great value of the homeopathic principle and in the occasional usefulness of what may be called allopathy. I am occasionally confronted by conditions which I cannot meet in their entirety by an exhibition of the homeopathic remedy. In cases where there is great pain, which I wish to suppress if I can. If possible, I should prefer to do this by the remedy which covers the totality of the symptoms. In this I may fail, for I confess to you that for me the indicated remedy will not always relieve pain. It may

be in sympathy that they cannot sleep, yet sleep is absolutely necessary; it may be that I cannot always give it to them with the indicated remedy, and I claim that it is not wholly my fault. It is very nice to say that in these cases the fault lies not with homeopathy, but with the prescriber. That may be true to a certain extent, but I have to give a remedy which will exert a physiological effect for the time being. I do not believe that such will cure as the homeopathic remedy cures. This should be done as infrequently as possible; as the author has said, it is occasionally necessary to resort to practice which is not homeopathic. I believe that this is so, and that we do not cease to be homeopathic physicians because we sometimes do this. I believe that part of the insincerity with which we are charged lies in the fact that we claim to be homeopaths and nothing else, yet we do use other measures. I believe that it is honest to claim for our method a very large place, but to admit that there are circumstances under which we may use other methods. I do not find the members of the self-styled "regular" school always to be enemies. I believe that this enmity is passing away, particularly among the younger members, who recognize that we are educated men, trying with them to relieve suffering humanity.

J. I. Hanchett, M.D.

I did not hear all of the paper, but I heartily approve of what I did hear. I am willing to confess and acknowledge that I do sometimes use means other than homeopathic, and, as the last speaker has said, I see no reason why we should not say what we are doing. We should do the best we can. Ninety-nine per cent of my prescriptions are homeopathic to the best of my ability, but I do not hesitate to give my patients rest or sleep by physiological means. I use acetanilid on myself and on my patients for headache and have never seen any bad result from five-grain doses. But I do not like to use these means on real sick people. In typhoid, in pneumonia, or other severe sickness, I hesitate more and more about using physiological methods, but in incidental pain, or where the body is not reduced, I do not hesitate so much to use other methods to relieve the patient. I see no reason why I should not acknowledge it. I have been considering this subject for the last seven or eight years and have been writing a thesis upon it, which I have not completed. I hope for more

evidence and more enthusiasm like what we have had to-day. It has been as a stimulant to me. I admire homeopathy above all methods of cure. As Mark Twain says, nothing has ever done so much for the world as homeopathy. I prescribe acetanilid, not with any idea of making a homeopathic cure, but simply because it relieves the pains.

J. C. Fahnestock, M.D.

I shall never forget Dr. Lilienthal, who had a great experience with both allopathic and homeopathic treatment, and who always said that the closer he adhered to the homeopathic treatment the better he was satisfied, while his patients received more benefit from it than from any other form of treatment. I am of the opinion that if the homeopathic law is just and right, you cannot make a right of a wrong, so there can be no compromise. Similia is greater than many of you think for or dream of. We are apt to think that similia has only to do with the administration of drugs, but it has a broader and wider scope. We use mental therapeutics the same as drugs in the line of similia, and much may be accomplished. The same with electricity and massage. I am glad to know and see and learn, the older I grow, that the closer I stay to the single indicated remedy the more and better results I obtain.

A. P. Hanchett, M.D.

I had not thought of saying anything upon this subject, as it has been discussed and re-discussed until the ground has been thoroughly covered. I agree with the last speaker in saying that the longer and closer I study the question, the more I am inclined to use the carefully selected remedy in all cases where there is a possibility of a curative result. There is a time, however, when we have passed beyond the possibility of hope in malignant disease, where there is much pain, and in these cases the physiological action of the drug must be sought. There may be some—and I wish I were one of them—who can relieve with the indicated remedy the dreadful pain of the last stages of cancer. The humane thing here is to relieve the agonizing pain, where every moment is one of dread. I have yielded to this feeling, and, having failed in other ways, have resorted to such means to secure relief. I see no reason why we should not admit that we do sometimes meet with such failures. When we hear some people say that they never use anything but the indicated

remedy, while we know that they do use other methods, we are liable to view them with distrust.

H. S. Miner, M.D.

I wish to reply briefly to some of the remarks of Dr. Hazard. I can endorse most of what he said, but the charges that he made against the allopaths are no more just and fair than the one which they made against our school—which was quoted by Dr. Mitchell in his paper. That has not been my experience, and I believe that in many cases we are benefited by associating with them. I want to relate one case and should like some one to tell me if the prescription made by the allopath worked homeopathically. It was a case of typhoid at the fourth week, without any relief or symptoms of convalescence. She was growing worse and getting no rest under homeopathic remedies. *Passiflora* gave some sleep, but it was not satisfactory. She was troubled with acute abdominal pain, coming every fifteen to thirty minutes for thirty-six hours, and with every third or fourth attack there would be a free mucous discharge from the bowel, slightly tinged with blood. The patient was weak and becoming much prostrated; temperature rising. Up to this time the evacuations had been nearly normal. The family became alarmed and asked me to counsel with an allopath, a good friend of theirs and one who had treated them occasionally. He came in, looked over the case, recommended a cathartic and mentioned the dosage. After learning that the case up to this time had not been constipated, but had nearly a normal discharge, he changed his prescription, saying that the cathartic would not be needed, but that the patient needed rest, and he knew of nothing but morphine which would give it. Temperature now 103.5° , pulse 130 to 140. I asked him in what form and amount he would prescribe it; he advised $\frac{1}{16}$ of one grain, repeated every two hours through the night. I consented, but continued the homeopathic remedy, which was at this time *rhus*. The patient enjoyed a good night and received only two doses of morphine, making $\frac{1}{8}$ grain, and the case went on to a perfect recovery.

W. A. Geohegan, M.D.

I like the plea made by Dr. Hanchett—above all things, let us be true to ourselves. Let us claim nothing for homeopathy which

cannot be substantiated. Was Dr. Hanchett's prescription homeopathic to a headache? What remedy is not? But was it homeopathic to that particular case? Probably not. This honesty is absolutely essential to progress; we must know not only what is homeopathic to a headache, but to the headache. Some of the prescriptions you have made have not been homeopathic. I remember that at the last session of this Institute when the subject of typhoid fever was up for discussion, one speaker said it was useless to give the therapeutics of typhoid because there is no remedy in the *materia medica* which might not be indicated. What a misconception of homeopathy! Could there be such a case of typhoid which would correspond with the totality of any or all of our remedies? This is not Homeopathy and the practitioner on such a basis are the worst enemies of our cause—brand them allopaths, for such they are. I do not believe that we need many remedies for pneumonia; I am not afraid of the name. The moment you say pneumonia, there are a certain group of symptoms necessary. They lead you to a certain group of remedies from which you must choose, and a remedy which does not produce a fair amount of those symptoms cannot be indicated in that disease. As to the use of morphine, there are many times when it is justified; perhaps you may be able to get along without it, but I cannot. It cannot cure the case, but it will relieve that which I, with my limited knowledge, cannot relieve with the potentized remedy. I am honest enough to confess this ignorance, and too honest to withhold the morphine.



Pil. No. 50.

Homeopathic Recorder.

At a regular monthly meeting of the Homeopathic Medical Society of Germantown the following resolution, offered by Dr. J. W. Heysinger, was adopted:

Resolved, That the Hahnemann Medical College and Hospital of Philadelphia, who have title in and to the last resting place of the immortal Hahnemann, be requested to communicate with the proper authorities in France, with Dr. Suss Hahnemann, of London, the grandson, with the Committee on Hahnemann Monument at Washington, and learn if it will not be possible to have the remains of Hahnemann transported to America

and placed beneath the National Hahnemann Monument now being erected in the capitol city of the United States.

JAS. HARWOOD CLOSSON, Cor. Secretary.

[That sounds strangely familiar. Why, certainly, that was our original recommendation—the bringing of Hahnemann's remains to this country. But this was before the body had been raised from its ignoble resting place and re-interred in Pere Lachaise. Is it not too late now? It would be a wonderful and very fitting thing to bring the remains of our Grand Master even from his present beautiful surroundings, and give it an honorable place in the land where Homeopathy is really and truly appreciated.]

Homeopathic Physician.

Dante's inscription on the entrance into the Inferno is sometimes applicable to the gates of the hospital. A patient is carried to the hospital with the reluctant consent of the relatives, who are assured that there is no help but the operation for—e. g., appendicitis. The relatives are told by the surgeon that he is able to cure the case, and, at any rate, the best for it will be done that is possible to do. The relatives are confident and submit. After a few days they want to see the patient and hear how he is getting on. But they are refused permission to see him, and sent away with the consolation that everything is done for him and he is all right. After more days the relatives become anxious, but they are not allowed admittance. A few days later they are requested to remove the corpse from the hospital. This does not happen in a small, out-of-the-way place, but in a big hospital with a great name. No wonder that the common people get shy of these beneficent institutions.—B. Fincke, M.D.

Modern Medical Science.

Henry B——, Huntington, L. I., American, age thirty-six, first seen May 1, 1898, two small lumbar abscesses. Treatment was according to the latest technique in this hospital on abscess, as follows: A trocar with canula was inserted at the lower end of the abscess, and another at the upper end, and removed, leaving the canulas in the abscess. The pus was drained out, and then bovine pure was injected through the lower canula, and peroxide of hydrogen through the upper one. The chemical reaction where the two met was

tremendous, almost forcing the canulas out, and continued a full minute. After the reaction was completed, Thiersch solution was sent in through the upper canula and allowed to run steadily through the cavity and lower canula for five minutes. Following this, the lower canula was removed, and iodoform-bovine was injected by the upper one. Then the upper canula was removed, and a compress sufficiently large to cover the abscess sac was tightly adjusted. At the end of twenty-four hours, the compress was removed, the canulas were again inserted, the abscess cavity was depurated by the bovine-peroxide reaction and Thiersch irrigation as before; and was filled with bovine pure, this time, through the upper canula. Both were then removed, and the compress was again applied, and was not disturbed—there being no pain or inconvenience or rise of temperature—until the 10th, when the abscess was found to be entirely healed.

A second abscess, higher up, was now discovered, and was put through the same course of treatment as the former. During the entire period of treatment, the healing process was assisted internally by a teaspoonful of bovine in milk every three hours.

Points of advantage in this procedure, as my experience leads me to believe, are: first of all, it does not subject the patient to a painful surgical operation, and it leaves no scar. In the second place—while, of course, to obtain this result requires much more care than the ordinary operation of opening an abscess—it does away with shock, which is so serious sometimes in the larger operations and particularly with nervous patients.

Homeopathic World (London).

There have been many grumblings about our [British Homeopathic] Congress of late—that they are not worth the time and sacrifices involved in attendance; that there is little homeopathy and less science about them; that, in fact, they are nothing like what they used to be, and no comparison with the gatherings in America; all the more to be regretted because by them we challenge the criticism of our brethren of the old school, and invite publication in the lay press.

I wish every homeopathic practitioner in the country would read your remarks.

Yours truly, JOHN W. HAYWARD.

[This correspondent refers to an editorial by Editor Clarke criticising the conduct of the

¹See Am. Hom., Feb. 15, 1898, p. 9-67.

last Congress and its banquet. Dr. Clarke mentioned the participation especially in the banquet of a number of ladies who were not physicians; the proposing of toasts that were not even medical; and the speeches by medical men whose names are not to be found in the Medical Directory. He arraigns the banquet and its precedent Congress as a mere social club, where medicine, and, least of all Homeopathy, had little foothold or recognition.

May we "Yankees" not also take this to heart? Are our societies enough medical (and surgical) to justify the expense of attendance? Many of our local societies when they meet, after holding out the printed promise of a number of good papers by good authors, take up the larger part of the time at command discussing some entirely irrelevant proposition; or else the promised papers and authors don't appear. It is a lamentable fact that it does not pay a busy practitioner to give up his evening office hour to listen to parliamentary sparings, or the reading of text-book papers. The reading of the minutes of a once-a-month local society ought to be quickly disposed of, and not hang fire and incite debate as if questions of grave import depended upon them.]

The Literary Digest.

A cry of indignation comes from a leading editorial writer in *The Hospital* (London, August 20) because, as he maintains, modern medicine is surfeited with knowledge. The writer is of the opinion that much learning has made the modern physician mad, or, worse still, has paralyzed him. He is also embarrassed by the richness of the *materia medica* that is annually poured out upon him by the manufacturing chemist. So he talks learnedly and experiments with his new drugs, but of practical experience with disease he has little. This seems decidedly a pessimistic view, but it is a view from a side upon which it may be worth while for both physician and patient to glance. Says the editor:

"The present writer has a grievance, a real, determined, angry grievance, against England, Germany, and America. These are the three countries which deluge medicine with physiology, good, bad, and indifferent, but mostly bad; which flood it with literature in the shape of medical books, with no soul of either science or practice in them, and which 'evolute' new remedies, not by the score, but by the thousand annually, not one of which in fifty is worth

even so much as a second thought. The inevitable effect of all this upon the average minds in the profession is, either to suffocate and so to paralyze them with what appears to be new knowledge, or else to so disgust the practitioner that he makes up his mind never to read at all, and on no earthly consideration whatever to experiment with a new drug. Medicine, in short, is swamped, drowned, stifled, and paralyzed by innumerable exploiters within and without its ranks; exploiters whose only object is the shortest possible cut, not to fame and fortune, but to notoriety and pelf. Now, all this has an exaggerated sound about it. But indeed and indeed, however exaggeratedly it sounds, it does not express one-tenth part of the miserable truth. The steady practitioner, whose aim is to supply his patients with the very best resources which the science of the times can afford, finds that about half his busy hours are spent in the brain-wearing, and what should be quite unnecessary, operation of separating the precious from the vile. And the vile is so very vile, and so overwhelmingly preponderant, that he almost wishes himself in the nether world, and permanently joined to the ranks of Sisyphus and Tantalus."

When he comes to look about for a remedy, our writer is still pessimistic; he concludes that none exists, save for the unusually strong in intellect. To quote further:

"And this is the reason: the profession is swamped with pedants; with persons in the consulting and special ranks who have a little money, no practice, and unlimited leisure; and these persons find their only consolation, the only salve of their disappointed self-love, in writing and reading all the rubbish which is annually poured out upon the profession, and so in persuading themselves that they are more learned and scientific than their better employed rivals. If it were not for the two or three thousand intolerable pedants in our ranks medical life would be worth living. As it is—well, a wise philosophy makes the best it can of the inevitable.

"For the strong, the mentally strong and resolute, there is, however, a remedy, even for so all-powerful a plague as the epidemic of medical books and new remedies. The strong have learnt, what all diligent students learn in time, the art of selection. They do not, and they will not, read the books and the papers of the exploiter, the pedant, and the notoriety-seeker. The study of a single page is generally

quite sufficient to show what a book is made of. If it be pretentiously expressed, if it be charged with a great show of learning, if it evinces a manifest anxiety to give the opinions of every other person, living or dead, who has ever written upon the same subject, then it is evident that it is a manufactured book. It is a pretty safe canon of literary criticism, especially of the medical order, that the book which gives publicity to everybody's opinion has no opinion of its own worth publishing. How much of other people's judgment did Lord Lister express when he was working out the antiseptic system of surgery and medicine? It was a frequent boast of the late Sir Andrew Clark, almost up to the time of his death, that he had never "written a book." What we need, almost more than anything else at the present moment in the medical profession, are two things: First, courageous independence of mind and judgment; and, secondly, a competent capacity for selection. Without these our practice has no rules, no certainty; it varies from day to day, and even from hour to hour; it is everywhere and it is nowhere. With them we shall daily place at the disposal of all our patients, if not the last new thing in drugs or the latest opinion in bacteriology, at least the best of the proved resources which the science of the time affords."

Book Reviews.

Nervous Diseases with Homeopathic Treatment. By Joseph T. O'Connor, M.D., Ph.D., Professor of Nervous Diseases in the New York Homeopathic Medical College and Hospital; Professor of Mental and Nervous Diseases in the New York Medical College and Hospital for Women; Neurologist to the Laura Franklin Free Hospital for Children; to the Flower Hospital; and to the Metropolitan Hospital (Blackwell's Island); Consulting Neurologist to the New York Ophthalmic Hospital; Member of the American Institute of Homeopathy, etc., etc. Illustrated. New York: Boericke, Runyon & Ernesty. 1898.

There are many excellent text-books on the specialties in medicine, with homeopathic treatment a prime characteristic, which will stand to the end of time, and among them notably this fine work of Brer. O'Connor. Any, the veriest tyro in nervous diseases, can take up this book, if he does so in the proper spirit,

and, beginning anywhere, in almost any chapter, reading along, will find something to interest him in this masterful presentation of the subject; and what is still more to the point, since we are a homeopathic profession and presumed to stand by our honest homeopathic authors and to counsel the purchase of homeopathic books—what is still better is that O'Connor is not afraid of homeopathy, and does not relegate it in the form of some twenty or twenty-five cheap and cut-and-dried remedies, with freshman indications, to the last page or two of the chapter, and there sift them in in pepper-box fashion with bounteous hand but indifferent knowledge of their comparative value. In startling and gratifying contrast to this catch-penny method, O'Connor walks into his subject from the start as if he really believed that Homeopathy was capable of doing good, which we all know he does believe, and not for the main purpose of making a salable book—a sale based on a dilute sentiment that because the alleged author is a member of our school of practice (by virtue of a diploma long since forgotten or hidden out of sight), we ought to support him.

We make no pretensions to specialist knowledge, and above all not in the Nervous Disease specialty; but we can tell a cloud from a hand-saw and we know this to be an honest book, one in which the author put his very best; one which will interest as it will instruct its reader of whatever school, and a book which will place its author in the very front among homeopathic authors.

At the very beginning O'Connor shows his fealty to homeopathy by inscribing and dedicating the book to the memory of that staunchest of old-fashioned staunch homeopaths, the late lamented Professor A. R. Thomas of Philadelphia, "at whose skilled hands I received my first knowledge of the beneficent power of homeopathy." Nothing obscure about that declaration! It means that homeopathy is the underlying principle of this splendid book; that it is woven into every page, and that the author is not afraid of being blackballed at some future day by some British Neurological Society, or any other, for having the word HOMEOPATHY too prominently displayed in his works. It does one good to find a courageous man in the ranks of our authors—one who not only quotes the Law of Similars, but who stands it up in front of him as a constant memorial of what he is, and what he purposes doing for his brethren and the aftercoming

profession through his own good example. Let us have more of this class of men and this class of books.

Dr. O'Connor has given us an intensely practical book. Remembering that it is a most difficult specialty, abounding in big words and many technicalities, we are pleased to say that he has made the way very clear and straight. Take for instance the chapter on locomotor ataxia (which alone is worth the price of the book), and it is really surprising how plain this subject can be made when in the hands of a master of English as well as a grand master of homeopathy. It is not tiresome in the least degree. The illustrations are excellent. The plan of the whole book is that of the pathological division. He takes up a disease, handles it in all its phases, yet all the while weaving in the proper treatment, abundantly supplemented with homeopathic therapeutics, and when that division is complete it is complete! There is nowhere in the book any evidence of over-fondness of self-parading of what "I did" when I was in Europe with my kodak, when I hobnobbed with the foreign neurological experts; no playing to the gallery or the grand stand in order to enhance the sale in the homeopathic colleges by a few extra copies. It is a strict attending to his knitting, giving the very best that may be had on the matter in hand, regardless of the personal equation. There is also nowhere any attempt to parade the isle of reel or the isle of steel or any other isle; the spinal cord with all its horns and sections with Latin and Greek joints and ramifications is kept well in the back (ground); and the unavoidable technicalities are kept well muzzled and only introduced when occasion demands and not run in like a stalking-horse to frighten the reader. There is nowhere any labored attempt to show how well he understands the revolutions and evolutions and convolutions of those cranial bodies usually called brains. The work is simplicity itself with an honestly applied technical knowledge. This is not to imply that O'Connor's book is a kindergarten system; it is complete in every detail, practical, and as valuable to the student on the hard benches, as it is to the practitioner, and his more learned brother, the specialist.

We like the book, and we like its author because he is not afraid of being classed with that apparently fast disappearing tribe—the Homeopaths—he does not give first place to the scientific fads and microscopical and chemical

discoveries of the day, but he rather sticks to his last as a genuine honest homeopath, never unmindful of the improvements of the day, but applying them intelligently to his work, and not vice versa. Yes, we heartily recommend this book.

Correspondence.

Editor AMERICAN HOMEOPATHIST:

Your issue for September 15th just received and I want to thank you for the article, "The Battle of the Announcements." Too many men just out of a homeopathic (?) college make a specialty of surgery and surgical diseases, while their medical armament is so-and-so's favorite prescription, consisting mainly of a four-ounce bottle of mixed fluid extracts, and which was given them at college with a wise but silent innuendo. Thus they consider themselves arrayed with an infallible remedy and go about shaming our highest medical art. Where do our homeopathic pharmacies receive their stimulus to prepare a regular homeopathic (?) product in the form of combination tablets of No. 1, No. 2, No. 3 and so on up to No. 60 or 70? It is a grievous shame that our homeopathic colleges will—in order to keep abreast of the times—make a specialty of everything that the allopathic colleges do and not make a specialty of Homeopathy.... If the present tide is not turned.... Homeopathy will soon be not only a disgraceful mixture, but actually a thing of the past.

W. E. SCHOONOVER, M.D.

Greenville, Pa.

[Is this not true? How many of the surgically-taught homeopaths care aught for the potentized remedy? How many of them do not use the combination (homeopathic) tablets? How many of them have not, on the q. t., received private and favorite formulæ from their homeopathic professors for this, that or the other possible ailment? Heaven speed the day when the Medical Side of our profession will again be deemed of equal value with the Mechanical Side.—Ed.]

Editor AMERICAN HOMEOPATHIST:

I desire help in the following case. The patient is a professional man about forty-five years old, medium weight and build. Has been troubled for some years with hemorrhoids and at times with rectal prolapse. About six years

ago he was treated by a Boston rectal specialist for a year and a half, but without benefit. About four years ago a western physician performed an operation which has also proved ineffective. Can medicines help this case? He is averse to any further cutting? He is a man of temperate habits. Hemorrhoids worse from walking or standing. Better sitting or riding a bicycle, worse during stool. Must press them back after every stool and after walking even short distances. Better after hot water enemias. In every other way health seems to be good.

ANXIOUS ENQUIRER.

[Will some one suggest the appropriate remedy and treatment?—Ed.]

Society Notes.

Canton, Oct. 20.—The fifty-first semi-annual meeting of the Homeopathic Medical Society for eastern Ohio was in point of numbers and interest the most successful meeting the society has ever held.

The visiting members were royally entertained by the ladies of the First M. E. church, a splendid dinner being served to all present. After the dinner a number of impromptu addresses were made. Dr. W. H. Kirkland of Massillon, O., read a carefully prepared paper on "Paralysis," in which he brought forward some new and ingenious suggestions. He was followed by Dr. O. A. Palmer of Warren.

All of the papers were ably discussed by the members, including Drs. J. A. Gann of Wooster; O. D. Childs of Akron; H. F. Biggar, William Murdock, and W. G. Meredith of Cleveland; R. B. Johnson of Ravenna; A. A. Brooks of Orrville; W. H. Kirkland of Massillon; Katherine Kurt and J. A. Hayden.

Dr. Biggar addressed the society on the aims and objects of the Palmer Arch, the new medical society that is flourishing so extensively in Cleveland. Information was eagerly sought as to the manner of formation of new branches, and it is probable that a number of branches will be formed in the near future.

The society appointed Dr. H. F. Biggar, W. H. Gifford and W. H. Kirkland a committee to report on the welfare of homeopathic interests in this state and also to prepare a plan for the general advancement of medical education. This committee is to report at the next meeting of the society, and when its report is presented it is expected to create a sensation in college annals.

Globules.

Dr. Thomas Minahan has removed to Joint Post Office, Pa.

Dr. Wm. C. Richardson has removed to 5359 Cabanne avenue, St. Louis.

"Hoxi, Joseph C. In 1861 I practiced Botanic; commenced practicing Homeopathy in 1868; graduated August, 1896, from Wisconsin Eclectic College; I now use all the remedies in each school." (Extract from Polk's Medical Register for 1898.) Frank and open confession, isn't it?

Dr. W. A. Phillips and wife, of Cleveland, while driving a spirited horse a few days ago met with a painful accident, both Dr. Phillips and his wife being thrown out of the buggy and hurt. The report says they were not seriously injured but were "very uncomfortable" at the hospital. Dr. Phillips is dean of the Cleveland Homeopathic Medical College. Later advices say that both patients have left the hospital much better and out of danger.

Dr. I. D. Foulon, the original and sparkling editor of the Clinical Reporter (East St. Louis, Ill.), delivered an address at the Peace Jubilee of his town for the benefit of the National Monument Association—the proceeds of which jubilee to be used in the erection of a monument to the memory of the soldiers and sailors who fell in the late Spanish-American war. Those who have read after Editor Foulon for a few years, and to those other many who have listened to his lectures at the Homeopathic Medical College of Missouri (St. Louis) as we did, will not need to be assured that the address was beautiful in diction as it was impressive in delivery. Dr. Foulon never fails of saying something when he speaks, and of saying it in a way that makes a lasting impression.

While in attendance at Pittsburg upon the recent Knight Templar conclave we marched side by side with Sir Knights Robert E. House, of Springfield, and T. T. Church, of Salem, Ohio, the one ex-President and the other the repeatedly elected Treasurer of the Homeopathic Medical Society of Ohio. But in the shuffle of that twelve mile march up the hill and down again, like the king of France's men, and the wetting (externally) before the

close of the parade, we lost sight of them. An expert osteopath might have made a lucrative deal next morning, pulling our several and respective bones back into place, especially at the hip joint and knee. We did hear of one Medical Sir Knight who had his leg pulled—but, no matter.

Lippincott's "Touch of a Vanished Hand" was one of the customary good stories of this popular periodical.

The American Review of Reviews continues to be an up-to-date, wide-awake, busy, professional men's journal.

She said her floating tubes was giving her much trouble. She had heard some one speak of the Fallopian tubes.

Climate as a Remedy for Consumption, with special notes on the climates of New Mexico and Texas. This is the title of an interesting paper reprinted from the North American Journal of Homeopathy, by Walter Sands Mills, M.D.

A little fellow of five, fearing that Santa Claus would forget him, wrote the following letter: Pleez fech me a ingen and some cars and a pictur book and sum candy and a poney and sum other anamiles. P. S.—Iff the poney is a mule pleez tie his behind leggs.

In looking over the editorial "Professional Privacy," Sept. 15th issue, we find that the printer caused us to speak of a "dairy doctor." We do not know where a "dairy doctor" would fit in in modern medicine, unless possibly in the Obstetrical Department.

The Third Annual Commencement of the Training School for Nurses associated with the Homeopathic Department of the University of Michigan (Ann Arbor) was held on Saturday evening, October 8th. There were two graduates, and there are ten juniors. Since the rehabilitation this Ann Arbor school is doing finely.

A handsome leaflet lies upon our table prepared by N. Emmons Paine, M.D., of The Newton Nervine, which contains a fine picture of the Institute's friend, Dr. A. P. Williamson, of Minneapolis. Dr. Williamson is Dean of the College of Homeopathic Medicine and

Surgery of the University of Minnesota, in which he is professor of mental and nervous diseases. He has occupied a number of important public positions, but has preferred to give his attention to private practice.

Dorsera is considered almost a specific for coughs attending measles, and coughs attending colds, either in winter or summer.

Dr. Phillip F. MacGown, Boston University, Class of '98, has located at Macon, Ga., and Dr. J. M. Baird, St. Louis Hom. Col., '98, at Columbus, Ga.

The Canfield Hospital Co., 26 Streater avenue, Cleveland, Ohio, is now open for patients. Local physicians are invited to place patients in the Home and attend them in person.

The homeopathic department of the University of Michigan (Ann Arbor) has sixty-one students, which equals last year's registration. How many other of our homeopathic schools have equalled this fall their registration of last year?

Dr. H. C. Aldrich, Minneapolis, editor of the Minneapolis Homeopathic Magazine, and Registrar of the American Institute of Homeopathy, has been appointed surgeon on the homeopathic staff of the Minneapolis City Hospital. We congratulate the hospital on securing so excellent a physician for this responsible position.

The man from Texas—R. B. Leach, M.D., now of St. Paul, Minn., read a paper before the annual meeting of the Minn. State Hom. Institute, May, 1898, on "Prophylaxis of Yellow Fever." This paper was later presented to the United States Senate by Hon. C. K. Davis. The learned doctor is on the Arsenization line again. He seeks to prove that this is as effectual a prophylaxis in yellow fever as in cholera.

The question of water or wine for the christening of the new battleship Illinois was answered in favor of the latter, and at the supreme moment Miss Leiter poised a gayly decorated bottle of Mumm's extra dry in her right hand, and as the big ship moved slowly toward the river cast it against the receding bow. The bottle broke into a thousand fragments, and the champagne streamed down the side of the Nation's defender. This was not

the only part played by Mumm's extra dry, for at the banquet given later in the day at the Hotel Chamberlin, Fort Monroe, this celebrated vintage was in evidence, the only champagne, in fact, served at the function.

"Craniotomy," a paper prepared and read by Dr. Frances S. Hilmyer before the Michigan State Homeopathic Society at Grand Rapids, May 17, 1898, is published in the current number of the Medical Counselor. It is a fine paper, and handles the subject in a very artistic fashion. The paper is worth careful reading and studying.

"We do not go for pus with a knife wherever we find it as Hahnemannians. We do not look upon pus as damnation or sure death if it is not evacuated. Many repeated experiences of others, as well as my own, have shown me that even large quantities of pus can be absorbed and are absorbed without the slightest danger to the patient."—W. P. Wesselohoff, M.D.

The Southern Homeopathic Medical Association is chairmaned in Materia Medica by Monroe, in Ophthalmology by King (Washington), Surgery by Green, Sanitary Science by Henry, Obstetrics by Ballard, Gynecology by Brooks and Clinical Medicine by Wilson. It will be a good meeting. Everybody go that can possibly go.

Several of our homeopathic journals have had something sharp and caustic to say of the hotel accommodations at Omaha. We have already said that this had no reference to the hotel recommended by the AMERICAN HOMEOPATHIST. Now we want to call attention to the Rndolf at Atlantic City, where we advise our friends and the Institute to go next year. It is a new hotel, situated directly on the beach, and without a peer in excellence of appointments and luxury. Dining room overlooks the sea.

Dr. Bushrod W. James, Phila., the American representative of the commission appointed at the International Homeopathic Congress at London, 1895, for soliciting voluntary contributions for the adornment of the grave of Hahnemann, asks that such contributions be made directly to the secretary, Dr. Francois Cartier, 18 Rue Vignon, Paris, France, or to himself at Eighteenth and Green streets.

The publishers have arranged with one of their patrons, whose advertisement appears during the month of November, for a list of all physicians who in applying for samples or circulars, mention this journal, and to each name will be sent free a valuable cloth bound book published at \$2. The *Materia Medica of Differential Potency*.

For several years the output of homeopathic books has been much restricted, owing possibly to the hard times. But since the beginning of the current year a number of good homeopathic books have found their way to our Reviewing Table, which fact, we trust, gives evidence of a change in the financial condition of the market.

Dr. S. A. Jones, of Ann Arbor, appeared before the Detroit Homeopathic Practitioners' Society on the evening of September 1st and presented an admirable lecture on "Dynamization." This forms the fourth and concluding lecture of a series, the first three of which were published twenty years ago under the title, "The Grounds of a Homeopath's Faith."

Dr. Wilson A. Smith is one of the Professors of Hering College and a popular one at that. Hering College ought to be well advertised and well taught, for it has a number of "literary fellows" who use the pen most effectively. From other sources we learn that Hering has polled a good class for 1898, and feels very enthusiastic.

The physician may diagnose ever so carefully, or prescribe ever so wisely, yet the moment that prescription leaves his hands the welfare of his patient is beyond his control. He may unite the skill of Osler, Pepper and Loomis in diagnosis, of Brunton, Wood and Hare in therapeutics, but it is all prostrate before the enlightened intelligence of some perfumed drug clerk. There are many noble leaders in pharmacy who have striven much to raise the drug trade to the dignity of a profession, and many of them have succeeded; but a chain is just as strong as its weakest link.

The American Homeopathist.

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The American Homeopathist.

NEW YORK, NOVEMBER 15, 1898.

FRANK KRAFT, M.D., EDITOR, CLEVELAND, OHIO.

OUR PORTRAITS.



DALVA H. SWOPE, M.D.,
Brockton, Mass.

TAFFY AND ONE WOMAN.

"Dr. Kraft has, by his unusual talents as an editor, made the AMERICAN HOMEOPATHIST one of the most commonly seen and familiar journals in the country."—Med. Counselor.

Ah, thanks, Brother. A little taffy now and then is relished by the best of users of the pen.

But, dearly beloved, you don't know what it costs to make your journal "one of the most commonly seen and familiar journals of the country." If you had been at Omaha, which you were not (or we miss our guess), you would have noted the dangers which beset the path of him who tries to be a faithful editor and at the same time runs for re-election to an Institute office.

Some of the few stories that were circulated concerning our politics, our religion, our morals, our bald head, our false teeth and baking-powder ethics may not yet have reached us. But many that were used, and by men who knew them to be false, we know. The war is over, the battle won. Stories told during the heat of a political campaign are taken by rational men, as a matter of course, to be lies. Those concerning ourself were of this nature, and ought not to be again revamped. But there was one which was circulated with such industry, seemed so plausible and was told with such admirable circumstantiality at the hotel tables and in the lobby and caucus, and persisted in by those who should have been at the Memorial Service instead, that we take of our time and space to call attention to it. This had reference to our hatred of woman in the profession, and in the college as student and as teacher.

The One Woman who has so frequently appeared in our writings was a satire on those two or three colleges which held out a large pretense of giving Woman equality with Man in the college as well as the profession. That much-vaunted equality consisted in giving one lone, lorn woman a half-hearted port-folio in the faculty, and assigning the remaining twenty-six chairs to Men! That is a masculine definition of equality! We thought to

shame these colleges into giving Woman a fair representation.

Our editorial on the New York College for Women was one of the many which these not-politicians did not think wise to mention. Fortunately the Women of the Institute had longer memories and were better posted than the many males! Our frequent editorial utterances concerning Lizzie Gray Guthertz, Nancy T. Williams, Sarah J. Millsop, Cornelia S. Stettler, Phoebe J. B. Waite, Julia Holmes Smith, Martha A. Canfield, Emily V. Pardee, Frances McMillan, Julia C. Jump, Genevieve Tucker, Florence Saltonstall Ward and many others of whom we have never written save in the highest terms of respect and praise, were not wholly forgotten; and we have reason to believe that the women stood by us. Thanks.

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West Eighth-fifth Street, New York.

References in this department are made by number. See issue of January 1, or December 15, of each year.

Medorrhinum in Blepharitis.

Dr. Martin Deschere treated a young woman, age twenty-three, who had chronic blepharitis since her eleventh year. He says in the Medical Advance: "She had been under homeopathic treatment all this time without any result. Her father is a very strict homeopath, and she had been to various high potency homeopaths. Her suffering was very intense all the time; she could hardly go into society on account of the effect of light upon the eyes, especially gas light. She could not read in the evening, and in the morning the lids would be closed, and she would suffer very much in getting them separated. There was a great deal of discharge, and in that strait she came to me about ten months ago. Now, knowing that most probably every remedy had been exhausted on this patient, I thought I would take advantage of the failure of my predecessors, and knowing that I had treated her father before he was married, for gonorrhea, I thought there might be some latent effect in this patient, and gave her medorrhinum on the experience had with her father. I gave her one dose and followed it up with sac. lac until I found that the effect had

ceased, then I repeated the dose until found that her trouble was entirely cured. I used the fluxion potency according to Fincke's plan; I am sorry to say I didn't mark any number; I simply marked it fluxion potency; I suppose it must have been what Fincke would call the fifty-thousandth, but it certainly was an effective potency and did the work.

Digitalis in Organic Heart Disease in Children.

Dr. H. A. Hare,* although not doubting the usefulness of digitalis in the heart lesions of children, believes that it must be given even more guardedly than in the case of the adult, and not uncommonly fails to do good. This failure seems to depend upon the fact that cardiac arrhythmia develops, and signs of auricular distension appear so soon as enough digitalis is given to maintain the improvement desired. To such an extent has this been the case that he has almost entirely given up its use in persons under puberty, and resorts to strophanthus in heart lesions and alcohol in heart failure resulting from the fevers, such as pneumonia.

From the reports of eight well-known physicians, the conclusion seems to be in favor of digitalis as a cardiac tonic in the valvular diseases of children, although the author still believes that its use should be more cautious, and that cases will be met more frequently in which the drug will fail to act satisfactorily than in the adult. Some years ago he called attention to the value of strophanthus as a substitute. Of eight replies to the question whether strophanthus had done well in such patients, two were in the affirmative and three placed it after digitalis.

Thuja in Nervous Functional Disease.

Dr. H. V. Halbert relates a cure of neuralgia of the face by thuja³. The symptom that directed attention to thuja was the aggravation in the sitting posture. Dr. Halbert concludes:

It is interesting to learn in connection with the study of this case that it was gradually revealed that in his earlier life a venereal disease had been attended by a condylomata which was suppressed by some local application. He had also suffered from a chronic prostatitis, which had caused a constant urethral discharge and imperfect urination. Furthermore, he had suffered with intermittent attacks of articular rheumatism, and other indications of a syctic taint. This was

sufficient to confirm the application of the remedy and account for the cure.

Thuja is therefore a remedy which should be used in neurasthenic conditions wherein genital disturbances are followed in after years by neuralgic attacks similar to rheumatic arthritis and a facial neuralgia which involves the facial nerve. It is little thought of in nervous diseases, but it can be satisfactorily used when the lower cord has been disturbed by genital disorders and the upper cord suffers in later years from reflex disturbance. So many of the neurological complaints are incident to sexual involvement in early life that it is well to take into consideration a remedy which is of value in the acute conditions of that character.

Thuja has a tendency to paralyze the rectum and bladder, and these conditions invariably produce neuralgias which are reflected in the fifth nerve.

Cimicifuga for Tinnitus Aurium.

Dr. Albert Robin and Dr. Mendel³⁷ and ³⁸,⁹ extol *cimicifuga* in this complaint, and cite, among other cases, one in which a plug of wax, the obvious cause of the buzzing, was purposely left, while the buzzing disappeared in two days under treatment. Here are their conclusions: 1. Buzzing of the ear may be considered as the reaction of the auditory nerve to direct or reflex irritation. 2. *Cimicifuga racemosa* possesses an action upon the auricular circulation and upon the reflex irritability of the auditory nerve. The average active dose is thirty drops a day. 3. Buzzing which has existed more than two years appears difficult to influence by *cimicifuga*.

Guarana as Used in Brazil.

Dr. Staeger¹⁰ ²⁸ has culled old observations of the native Brazil remedies, from which we note the following regarding guarana, the Brazilian cocoa:

Guarana (produced from *paullinia sorbilis*, one of the *sopindacæ*) contains, as is well known, some caffeine, together with other constituents, and is much used as a beverage in South America, like as the Paraguay tea and the Mate tea.

Guarana affects especially the nerves of the abdomen and acts very efficiently as a depressing remedy in diarrheas and dysenteries originating from colds or from mental emotions, or, in general, from states in which a morbidly augmented sensitiveness of the

plexus coeliacus is present. It is not, however, indicated in congestions or *saburra*. In larger quantities it excites the whole nervous system, causes diplopia, sparks before the eyes, insomnia, an unusual excitation and other similar states. In metorrhagias and other passive hemorrhages it has been of excellent service. Somewhat peculiar is the notion spread through all Brazil that it acts, indeed, as an aphrodisiac, but takes away the "*vis foecundans seminis virilis*." This double action need not surprise us in a remedy used as a beverage. A homeopath will at once understand such a diverging action of a remedial agent.

Cicuta virosa in Epileptoid Seizures.

This remedy is a powerful spinal irritant; it also has a sedative effect upon the motor cells of the brain. Under its influence the convulsions affect mostly the arms and limbs, while under its continuous action the body assumes the position of *opisthotonos* generally for quite a long period. The distortions are severe and are frequently followed by unconsciousness, and this is followed by a cataleptic state which often bothers the patient for several days. A tendency to paralysis is another noticeable feature, evidently from the extreme tension of the arm and limb muscles, due to the excessive innervation during the period of the seizures. Again, the remedy is indicated by the pronounced facial cyanosis, and frothing at the mouth is decidedly pronounced. The patient is very sensitive just previous to the attack, and this is the characteristic aura. The remedy also acts violently on the diaphragm, hence the attendant symptom of hiccough is generally observed before and after the spasm; more than this, there is a more extensive feature of this kind, for the patient gasps and struggles for breath and deglutition is performed with difficulty; these characteristics do not appear so often during the spasm as before and after it. Another peculiar feature, when this remedy is indicated, is the appearance of a papular eruption (which is very sensitive to the touch) a few days preceding the attack.

Dr. H. V. Halbert, who makes these statements points the moral by narrating a case in which epileptoid seizures were relieved and made infrequent by *cicuta*. The indications were severe *opisthotonos*, facial cyanosis and a tendency to hiccough as he recovered. The peculiar vesicular eruption and inability to swallow solid food were also present.

BROTHER LOVE AND BROTHERLY LOVE.

"I have always insisted and do now conclude that we should believe nothing that we hear regarding doctors that is unkind, and very little that we know to be true, and I argue further that any member of our guild is better than he looks, for few men have courage enough to appear as good as they really are. Doctors can safely keep in mind always that old German proverb, which, freely translated, reads: "To know all is to forgive all." And who has more to forgive than a doctor? But, old fellow, go on forgiving. Life is too short to retain for a minute unkind feelings; they not only perturb the mind, but impair digestion, check elimination, and indeed are the most serious general interrupters of metabolism met with in the scheme of life."—Editor Love in Medical Mirror.

Beautifully stated and ought to be pasted on the inside of every doctor's hat for instant and frequent use. How many doctors escape the tongue of slander? Not one! Mention some good doctor who has not been accused of abortion. Who has not been unduly familiar with his female patients. Who is fit to doctor a cat. Who pays his rent and coal bills. Who does not neglect his wife and family. Who is not a hypocrite. Who is safe to leave with your cases. A doctor's reputation seems to be a most prominent point around which to wrap the tongue of bitterness and vituperation. Yet, notwithstanding this unhappy fact, many of us are not over-anxious to speak a good word for a struggling brother, nor protect him who has ascended a little higher on the professional ladder than ourselves.

A few years ago, while attending a cancer case, the nurse informed us that the prominent gynecologist who had operated on the cancer case had the day before been guilty of criminal assault—a charge placed against him by an indignant mother. The 15-year-old daughter of this mother had been sent to the office of the p. g. for medicine. The p. g. had called the girl into an inside room and there deliberately assaulted her. The nurse knew all parties concerned, and was positive. From our office an hour afterward we telephoned to a friendly doctor officing in the same building with the p. g., and learned that the p. g. was then and had been for five weeks in the south and would not return for another week!

While yet abiding in our former country fastnesses, wearing rubber boot., a ginger

beard and red woolen mitts, a series of burglaries were perpetrated in the village. The jimmy with which the doors were pried open was found under our kitchen floor. Another time we mounted the Grand Army building, took the flag off the staff and hid it in our hay mow! And even to-day, after all these years in Cleveland, living a peaceful, uneventful, unknown and ungynecological life, if any one will hark back to our former balliwick, he will find all the good we have done interred with our memory, and the found jimmy and the lost flag are still fresh and green in the alleged minds of the dry goods box whittlers at the general store and post office.

Our very latest escapade smacks of progress and originality in that it consisted of enticing the nurse girl from one of our patients and delivering her over to another patient who was willing to pay a slightly enhanced salary.

Let us learn the lesson which Brother Love inculcates. Let us turn the sunny side of our opinion outward occasionally and not always the seamy side. Let us not always find fault with his treatment, his bandages or his opinions. If a nasty story comes concerning him let us face it down. Even if another doctor's buggy ties up next door to our office let us not forget that other doctors do the same in his neighborhood.

**ACETIC ACID.**

W. A. DEWEY, M.D.,
Ann Arbor, Mich.

The common name of this substance is vinegar. It was mentioned by Moses 1,490 years before Christ (Numbers vi. 3). It was mentioned by Hippocrates and Dioscorides; and it is related of Cleopatra that she won a wager that she could eat to the amount of a million sesterces, and did so by dissolving large pearls in vinegar and drinking the solution. Acetic acid is found in the juices of plants and is also a product of fermentation in apple cider, wine, beer, etc. Common vinegar contains about 3 per cent of acetic acid. The common vinegars are the cider vinegar and the wine vinegar, the latter being largely used in Europe.

It was introduced into homeopathy by Dr. Constantine Hering, in whose "guiding symptoms" is found a full record of its symptomatology. He predicted that acetic acid would be one of our great polychrests, like *natrum muriaticum* and *sepia*. Its characteristics are few, but exceedingly well-marked, and, when pres-

ent, will enable us to cure many obstinate cases.

GENERAL ACTION. If acetic acid or strong vinegar be taken constantly, it sooner or later causes eructations, heartburn, loss of appetite, diarrhea, emaciation and debility. The following case illustrates its action on the nutrition of the body. It is taken from the London Medical Gazette, 1839:

"A young lady in easy circumstances, very plump, with a good appetite, enjoying perfect health, and a complexion blooming with roses and lilies, began to look upon her embonpoint with suspicion, for her mother was very fat, and she was afraid of becoming like her. Accordingly she consulted a woman, who advised her to drink a small glass of vinegar daily. The young lady followed the advice and her corpulence diminished. She was delighted with the success of the remedy and continued it for more than a month. She then began to have a cough, which was considered as a slight cold. Meantime, from dry it became moist; a slow fever came on, and a difficulty of breathing; her body grew lean and wasted away; night sweats, swelling of the feet and legs succeeded, and diarrhea terminated her life. On examination all the lobes of her lungs were found filled with tubercles."

Acetic acid produces a gastro-enteritis, causes emaciation and poverty of blood, producing a general scorbutic condition. It is hemostatic, and the vapor inhaled causes reflex contraction of the vessels and raises the blood pressure. Locally it arrests hemorrhages, epistaxis, uterine, etc. Sponging the surface with it in fevers checks the perspiration and reduces the surface temperature.

We should always think of the remedy when we find the patient:

1. Passing large quantities of pale urine.
2. Particularly accompanied with an intense thirst.
3. And when the skin is dry and hot.

The burning dry skin is always characteristic of this remedy, and also the profuse sweating and general debility.

The countenance indicating acetic acid is PALE, WAXEN, EMACIATED, eyes sunken and surrounded with dark rings. There is the most intense thirst, a burning thirst, that even large quantities of water fail to allay. The patient vomits after every kind of food; pain in the stomach, abdomen; burning pain in the stomach and chest, followed by cold sweat of forehead and cold skin. Urine INCREASED IN QUAN-

TITY. He passes large quantities of pale urine day and night. There is diarrhea with colicky pain and swelling of legs and feet; also hemorrhages from the bowels, MUCH SWEATING, BATHED IN SWEAT, night sweats, hectic fever, cough, dyspnea, edema and emaciation.

RESPIRATORY. Acetic acid has a marked action upon the respiratory organs, producing, and, therefore, curing, hoarseness, hissing respiration, as in croup. Croup with difficult breathing, hollow sound with each inspiration, face bright red; perspiring, weak children. Here it may be useful to evaporate vinegar in the room. It is also useful in diphtheria.

HEAD. Flushing of the face, distension of temporal bloodvessels, with increased heat of head; hence it corresponds with hemorrhages with congestion of blood to the head, not like aconite, active congestion, but from watery blood, producing ready and easy flushing.

STOMACH. The remedy produces great weakness and uneasiness in the stomach, cramps and colic, and it gradually destroys the texture of the stomach and the digestive function, and hence emaciation. Weak, debilitated children with blue rings under the eyes, emaciated and sweaty, find in this remedy the similia, especially if they are children of victims of the habitual use of alcohol, tobacco, coffee or opium. Old toppers who crave vinegar and pickles, and who have nervous headache, due to these causes, often find a remedy in acetic acid. The use of vinegar should be stopped in treating chronic diseases, and it should be remembered that certain remedies are aggravated by it, notably belladonna, but also arnica, lachesis, aconite and mercurius.

DEBILITY AND ANEMIA. Another condition of acetic acid is marked debility. Certainly debility, for what can one expect from a drug that produces a gastro-enteritis with its impaired nutrition, so that appetite is absent, and a pouring sweat and diarrhea present. Is it a wonder that very soon the victim will show it in his countenance? Pale, waxen, emaciated, he will have attacks of faintness and trembling, flushes of heat, cold extremities, rapid, small, weak pulse. This lack of vitality, of course, gives aversion to cold food; cold drinks cause distress. In the stomach he has pain—gnawing, ulcerative pain. It is painful to pressure, and the abdomen feels as if it would sink in. It causes dyspepsia with dyspnea. But also general anemia is developed, cough sets in and the extremities swell, etc.

Another good picture of anemia in nursing women we get from the provings. Thus, while a nursing woman took large quantities of vinegar, she found that the milk became very dilute, bluish and almost transparent, of sour taste and smell, the child wasted and died of diarrhea, later the mother also sickened, became very pale, had chronic menorrhagia and dwindled to a skeleton. Thus the acid will be found homeopathic in the anemia of nursing women with these symptoms. Here it may follow cinchona, which is indicated in complaints following the loss of vital fluids.

HEMORRHAGES. Acetic acid tends to break down red blood corpuscles and mucous membranes, and hence it favors the production of hemorrhages. Bleeding from any part, nose, uterus, ples, lungs, etc., where the characteristic symptoms are present, namely, the pale, waxy countenance in tired, worn out individuals. **HEMORRHAGES AFTER LABOR ARE OFTEN CONTROLLED BY VINEGAR.** Here, too, it follows cinchona. Vinegar is a very useful remedy in post-partum hemorrhage, often acting more promptly than ergot, is easily procurable, simple and harmless and not open to the objections against ergot. Externally it has also been used to control hemorrhages, snuffed up the nose for epistaxis and injected into the uterus.

DIABETES. Remember the three great characteristics:

- 1.—Intense thirst.
- 2.—Voiding of large quantities of pale urine.
- 3.—Marked debility,

and you will have a trio of priceless value in diabetes, both mellitus and insipidus. After its administration, say in the third potency, you will find, when thus indicated, the urine and thirst decreased in a few days, the strength and weight of the patient increased and sleep improved.

Phosphoric acid should also be remembered, it has excessive thirst, debility, emaciation and excessive urine. It, too, has the sweat. It is especially indicated after loss of fluids, and also for the bad effects of grief, anguish, sorrow and care, mental states so frequently causative of diabetes.

Helonias has the unnatural languor, weakness and weariness, large quantities of clear, pale urine are passed, patient very melancholic. It has pain and lameness in the whole back, especially in the region of the kidneys.

Carbolic acid urine contains sugar, there is also a copious flow, it, too, has the languor and prostration. It has an unusual appetite and thirst for stimulants and an increased sense of smell which is very characteristic.

Murex and natrum mur. also have polyuria.

DROPSY. Again, the various forms of dropsy, general anasarca and dropsical effusions in the abdomen and legs find a valuable remedy in acetic acid when the above symptoms are present, the legs and abdomen are much swollen and you have the characteristic pale, waxy, emaciated countenance and broken-down constitution.

Dropsy is in proportion to the amount of hydremia, and the amount of water in the blood is generally dependent on the action of the kidneys. We meet, however, with cases that show extensive and progressive dropsy where two to four pints of urine are passed daily, but it will be found that these patients are troubled with great thirst and drink far more than they void through the kidneys or skin, and the excess of drink over the quantity of urine, accumulates in the blood, causing hydremia and dropsy. These are acetic acid cases, for here we have intense thirst, profuse sweating, large quantities of urine are passed, yet there is dropsy and pale, waxy skin. The gastric symptoms prevail with this remedy, sour belching, waterbrash, etc.

Arsenicum has the same condition, only more so. Intense restlessness, irritable stomach and bowels, eating and drinking cause vomiting and diarrhea. Thirst great but for little and often. Dropsy of old topers. Dyspnea with anxiety and restlessness worse after midnight. Burning sensation relieved by warmth, the application of warmth is grateful, as are also warm drinks.

Apis can be easily distinguished by the absence of thirst—it is the thirstless remedy in dropsies. It has dyspnea, a sensation as if every breath were his last.

Digitalis often precedes acetic acid in dropsical affections, remember its slow pulse, the sinking at the stomach, difficult urination and cardiac involvement.

Apocynum should also be remembered.

Acetic acid or vinegar, preferably French wine vinegar, is of great service in controlling the profuse night sweats of phthisis. Sponge with one part of vinegar, two parts of water, and one of cologne water is very grateful and efficient. It is also useful to sponge the chest

of those predisposed to phthisis with dilute vinegar. It is used successfully as a local direct application to the womb in follicular endometritis, and also as an application in herpes circinnatus.

Acetic acid is an antidote to all anesthetic vapors and is to be thought of in asphyxia from charcoal fumes, a finger may be wet in vinegar and applied to the gums. The vapor may also be inhaled in chloroform and ether anesthesia. It is also said to be useful in sausage poisoning. Stings of insects may also be bathed in it.

The sore throat of scarlatina is much benefited by the application of the steam of vinegar, also in quinsy and every form of ulcerated or relaxed sore throat. It has been used as a fomentation externally in throat troubles from time immemorial.

The strong acid has also been employed to remove corns and warts.



Pil. No. 50.

From Bret Harle.

It was from a certain physician; a man of broad culture and broader experience; a man who had devoted the greater part of his active life to the alleviation of sorrow and suffering; a man who had lived up to the noble vows of a noble profession; a man who locked in his honorable breast the secrets of a hundred families, whose face was as kindly, whose touch was as gentle in the wards of the great public hospitals as it was beside the laced curtains of the dying Narcissa; who, through long contact with suffering, had acquired a universal tenderness and breadth of kindly philosophy; a man who, day and night, was at the beck and call of Anguish; a man who never asked the creed, belief, moral or worldly standing of the sufferer, or even his ability to pay the few coins that enabled him (the physician) to exist and practice his calling; in brief, a man who so nearly lived up to the example of the Great Master that it seems strange that I am writing of him as a doctor of Medicine and not of Divinity.—The Man Whose Yoke Was Not Easy.

North American Journal of Homeopathy.

For a man in health, calculations as to nearness or remoteness of death, resolve themselves into problems much more difficult to solve;

and the result is far more widely approximate. But if cardiac innervation be found defective, the fate of that man were as follows: If he be forty-five years old, and a business man, and times precarious, I should predict death within a year, and let the newspapers call it "heart-failure." If he were a young man, and had any tendency to throat troubles, or to rheumatism, I should predict his death before thirty. If the subject were a woman, I should forbid pregnancy, as I should tell her husband that he would never see his wife a mother. If there exist hemorrhoids, or extensive varicosities elsewhere, I should predict embolism of the great cerebral vessels, and sudden death during climaxis, under chloroform, or for removal of the "pile-bearing inch." Let it be urged, however, that no matter what the state of the health may be, no matter what condition the other organs have come to, to look to the heart as the sole measure of a healthy man's vitality, or of what is left to a sick one.—Chas. S. Winters, M.D.

The Critique.

The unanimous election of Dr. Genevieve Tucker, of Pueblo, to the presidency [of the Colorado Homeopathic Medical Society] was a wise choice for our next presiding officer and a deserving compliment to one of Colorado's most talented and most successful physicians. Under Dr. Tucker's direction the State Society will grow stronger and better, the somewhat divided forces will be united and much efficient work will be done for the cause of homeopathy.

[Yes, indeed, Dr. Genevieve Tucker will make a good president; she is competent, vigorous, and homeopathic. So we have another One Woman gone to the head of the class! This makes three of a kind: Sarah J. Millsop, vice-president of the American Institute; Lizzie Gray Gutherz, president of the Southern Homeopathic, and now Genevieve Tucker, president of the Colorado State Homeopathic.

THE AMERICAN HOMEOPATHIST congratulates you, Dr. Tucker!]

Hahnemannian Month'y.

How, then, shall we avoid, in dealing with the undergraduate, this one-sided teaching? My answer is this: He should be taught, from the inception of his medical course to its very end, that there is a totality of the organism as well as a totality of symptoms; that there is no organ of the body independent of its fellow or

flows, that all are connected anatomically and physiologically, and that disease or lesion of any one may, and frequently does, disturb other and distant organs. Besides, he should become thoroughly imbued with the idea that the mission of the physician is, first, to prevent disease, and, second, to cure disease which he cannot prevent, in the easiest and safest possible manner—by internal medication if possible, by other methods if necessary. He should be given an abiding faith in the therapeutics; but he should likewise be taught the limitations of the internal remedy, so that each case which presents itself for treatment will be studied from a diagnostic and pathologic as well as a therapeutic standpoint. If he be thus equipped, there is little danger of his becoming either an extremist in therapeutics or a pure localist. He will be a true physician in the highest sense of the term—a safe man to entrust with the lives of his fellow-men.—J. C. Wood, M.D.

[Very well stated, Doctor!]

Hahnemannian Advocate.

Importance of Chemistry to Physicians.—A thorough knowledge of Pharmaceutical Chemistry is of inestimable value to physicians, as it enables them to determine when to use a remedy in the liquid or powder form. Some remedies are so sensitive to light and air that they undergo a complete chemical change during trituration and the physician would be unable to obtain results expected. For example, in the case of phosphorus, in triturating, it changes to phosphoric acid, by the presence of moisture, a substance entirely different in its action. Hence phosphorus should only be prescribed in alcoholic dilutions, as it is the only form in which it retains its elementary properties for any length of time. Phosphoric acid is readily detected by its sour taste and odor in the lower potencies. Argentum nitrate is a remedy that should never be used in trituration or tablets, as the exposure to the air during trituration with sugar of milk changes it to argentum oxide, detected by its dark color, in the lower triturations. The dilutions of argentum nitrate up to the 5x should be made with distilled water, as argentum nitrate is sparingly soluble in alcohol and the lower dilutions should be made fresh. In making dilutions it is of vast importance to know what solvents form explosive compounds. Even in the mixture of water and sulphuric acid extreme care is necessary, as great heat

is generated by this combination, although no chemical change takes place. Nitric acid and alcohol form an explosive compound at ordinary temperature, resulting in nitrous acid and nitric ether being made. Consequently the lower dilutions of nitric acid should not be made with alcohol but with distilled water. With muriatic acid, alcohol will form hydrochloric ether in the lower potencies, so this dilution should also be made with distilled water. These few examples serve to show what danger and fatality might result from a physician's ignorance of chemistry.—John Hoen, Ph.C.

The Clinique.

With the discovery of parasitic animals and plants this conjecture [that parasitic beings, including, of course, bacteria, are never more than causes] soon became a fact. Nothing was easier than to generalize this fact and to assume the presence of independent organisms in each contagious disease. The younger generation of doctors and students disregarded with fiery enthusiasm the necessity of a practical proof, and was filled with the conviction that all infection depended on the invasion of parasitic organisms. And since it was just the severest infections which were produced by the minutest plants and in which bacilli and cocci, or as they called it for short, bacteria, were found in greatest abundance there was circulated for some time that beatific axiom, "Infection is pollution by bacteria." * * * It may be said that a contagious disease affords suspicions of a bacterial origin, but it should not be called simply bacterial. To do so hinders further research and lulls the conscience to sleep.—Ludlam from Virchow.

Praise from Sir Hubert—ness-paw? So that bacteria are not the sole cause of disease—microscopy notwithstanding. As the homeopaths have contended all along, there must be a condition precedent, a receptive soil. And when you have admitted so much, why not make but one bite of the business and admit that bacteria are a result and not a cause? When you come to think it over in the quiet of your study or while jogging along over a muddy country road at half-past two in the morning, doesn't that really seem the most logical and rational position to take—as general practitioners, we mean? If bacteria was the cause of disease there wouldn't be a doctor alive to-day. Hadn't thought of that, had you? Well, do, some night, when you get to think-

ing why not every man takes gonorrhea, though exposed; why not every person takes small-pox, though unvaccinated and exposed; and per contrary why a knowledge of the presence of bacteria gives us no more aid in the treatment of consumption than it did years before the omnipotent microbe assumed medical supremacy.

Medical Brief.

The following is a method of treating tape worms which can be guaranteed "head and tail, or no pay," and for which no preliminary treatment, dieting, or fasting is necessary: Having secured your patient, give him two ounces of castor oil, emulsified with a glass of sweet milk; in half an hour give the pomegranate preparation, flavored with a few drops of lemon juice, acid phosphate, or other aromatic to disguise the taste. In another thirty minutes repeat the dose of two ounces of castor oil in milk, and your patient will realize in a short time that the coup de ver is an accomplished fact. Have a bucket, about one-third full of warm water, to receive the discharges in, and a basin of warm water in which to wash the worm. *Tenia* removed by this treatment come away whole and alive, and can be seen to move about if kept in a basin of warm water. Instruct the patient not to pull on the worm if it seems slow about coming away, as the retained portion of a broken worm is hard to remove. Should the bowels be sluggish give a seidlitz powder, or a small rectal injection.

The unusual efficacy of the remedy, it is claimed, was due to the fact that it was made from the root bark of the wild pomegranate which had been specially imported from Africa. Now, the pomegranate is an old-time vermifuge, and it did not take me all day to figure out that this cure was nothing but a crudely prepared alkaloidal combination, or an impure pelletierine. With this information it was not long until there was a supply of the remedy in my office. The unadulterated bark was secured from friends in Sierra Leone, West Africa, whom I had met and lived with during a two years' sojourn in the Dark Continent (1885-87), and a Ph.G. friend of an experimental turn did the pharmaceutical work for me. In the course of our investigations we found that the freshness or dryness of the bark had very little to do with the efficacy of the "cure," but that if the latter was aged it seemed to lose its strength. Just why this was so was never studied out, but now the remedy is prepared

fresh for each patient. The method of extracting the alkaloids can be found in any laboratory book on pharmacy which gives working formulae, as the United States Dispensatory, Stille & Maisch's National, etc.

As a matter of business, let me suggest that the fee be paid in advance, if your patient is unknown or unreliable, for a tape worm once removed cannot be replaced very easily.—Ralph St. J. Perry, M.D.

So many tape-worm "cures" are on the market, which prove so little valuable, and, moreover, are so tiresome and nauseous in their use, that we take pleasure in giving the above, in the hope that the long wait, the fast the night before, and the nastiness of the "dope" may be entirely done away with. The editor will be glad to hear from those who make use of this "cure," detailing their success or failure.

The National Advertiser.

This is a superstitious age. People believe in charms, portents and omens, and in the occult powers of strolling quacks. Many newspapers aid superstition by publishing the advertisements of some of the most shameless rogues that an all-merciful and inscrutable God permits to live. . . . Some newspapers have a high rate for astrologers, fortune-tellers and the like, saying that they want to discourage such lines of business. This is like Max O'Rell's hackman, who charged double fare for violating the Sabbath.

A chap in Duluth, who has no difficulty in getting local newspapers to accept business, appears to combine the functions of clairvoyant and abortionist. He wants from 50 cents to \$1 for a "reading." He does not quote rates for criminal practice in medicine.

The horde of magnetic healers is permitted to prey on the public. I have heard of no newspaper that has made war on these rascals. I have no doubt that in many a counting room the advertisements of the healers are refused, but surely the responsibility of the publisher does not stop here. Is it not due to readers that positive steps be taken to bring down the birds of prey who would make an ally of the press?

[But where draw the line? Shall it be at the dollar mark? Look at your morning paper, which your innocent daughter also sees, and say why the Pennyroyal Pills ad. shall be squashed and not the gigantic robber wholesale drug corporation, which stalks boldly through half pages of advertisements, and owns the press of

a whole state? Of the two, the robber corporation does infinitely the more harm. For where one silly woman is caught in the abortionist toils, a hundred—nay, a thousand—lose both money and health to the quasi-respectable scoundrels, who, by reason of their wealth, are able to muzzle the press.]

Medical Brief.

Pineapple juice is the latest remedy for diphtheria. The pineapples are compressed and the juice used as a drink. It is said that the negroes of Georgia and other Southern states have used this remedy for years, with success.

The juice cuts or burns out the membrane of diphtheria rapidly. Constitutional medicines are always necessary.

The juice is a local remedy only, and taken in teaspoonful doses every two hours undiluted.

The local journals assert that pineapple juice acts so promptly that few, if any, cases of diphtheria perish. It is harmless, and agreeable, and efficacious.

Pineapple juice (by analysis) contains: Sugar, water, albumen, citric acid, malic acid, tannin, cellulose. A peculiar oil held in suspension. Citric acid is found in lemons, oranges, and plums, and has been used in malignant throat disease for many years.

Any mild acid acts well in diphtheria, especially when found combined as in the pineapple.—Luigi G. Doane, M.D.

[We quote this article, not because of its claim to being a late remedy in diphtheria—for it is not—but to give the minute details of its elementary parts and its chemical constitution in order to indicate some plausibility for its use.]

Homeopathic Recorder.

As to the use of pessaries Dr. Burnett (p. 42, "Organ Diseases of Women") says: "I do not disapprove of pessaries when nothing else can be done (in a prolapsus); but a pessary is only a makeshift of a very questionable kind. It is always better to acquire by means of it the ability of moving about rather than to remain in bed, and thus gradually to become a useless mass of tissue. But a pessary does not cure anything, and not only this, but it may make a large and heavy organ larger and heavier. The true indication is, so to reduce the size and weight of the uterus that it becomes light enough to again occupy its natural position. This is actually possible, but it cannot be done

without organ-remedies, nor on the other hand without constitutional remedies if the hypertrophy is due to constitutional grounds.

[What's that? Can't reduce the womb without organ remedies? Say, you just had otter come to this blessed country a bit and see the amateurs with a short curette cut down to the muscular strata in the interior; then cut off the whole neck; then cut out a few "fibroid" tumors, etc., etc. Bless you, we can reduce the womb without organ-remedies. You're old-fogy over in England.]

Lancet-Clinic.

Priests of the church especially are accustomed to following up the sick of the church; they see them as often, and, sad to relate, with clearer eyes and heads than many a doctor. The importance of the sacraments is ever in their mind, and to them the moment of death is closely watched. The priest can always tell more clearly than the doctor the hour of death. He is there to comfort the last moments of the ever-faithful. The priest, too, is the best judge of the physician. There are but very few priests, too, in remote rural parishes of France who cannot act wisely in all emergency cases. There is no good reason, then, that clergymen of all sects should not practice. There is vastly less humbug in religion than in medicine. Yet the priest is ever charitable. No one ever heard a priest calumniate a doctor, no matter what the latter's religion might be.

[This is from a French letter, and we publish it to show the radical difference between French and Continental views on medical clergymen. It may be, and we really believe it is true, that a Catholic priest is never the enemy of the physician; but we regret to say that it is not true of some of the Protestant clergy, with many of whom we have come in contact. In a later paragraph this French writer says "when the churches organize their own orders, that will neither charge fees nor refuse service, be they poor or rich, the trade instinct in medicine will be driven out." And when that day shall come the sick will all be well, and all these latter will be in heaven. When a priest or a physician or a hybrid of the two reaches the plane of working for nothing, then nothing will be the result.

Where you find a quick pulse without febrile temperature, look for a dilated heart.

THINGS WE OUGHT TO DO.

R. M. SKINER, M.D.,
Fleming, Va., Ky.

It has been the tendency of the times to write articles from some idea of advancement with the profession regardless often of the value of the subject written upon. Even the laity and the less advanced practitioner are quick to see the difference and value them according to the meat that is in them. Some write to display their rhetoric, others their reason.

The value of an article, especially in a medical journal, depends on its brevity and condensation. As a reader of medical journals, and upon inquiry among professional men, I find that the journals that produce the short and "to the point" articles are the ones that are most popular with the general practitioner.

It has been my experience that I can get more information, of the lasting kind, out of an hour's talk with a busy practitioner than all the medical conventions I ever attended. In private conversation they are not hampered by the omniscient member who rises to inquire as to the validity of his claims, and who doubts the correctness of his statements.

Every man knows some remedy or remedies that he has proven numberless times on some symptom, and yet he never thinks of the value his experience might be to some other symptomatologist who is wading through volume after volume of tiresome repetitions of useless symptoms in somebody's *materia medica* or concordance repertory.

Nearly every doctor has his pet theories and hobbies in regard to accessory treatment and the causation of disease, but they are generally harmless, and you may accept them or reject them as you please, but when it comes to *materia medica* and the proving of remedies the immutable law must prevail, and the symptoms that have been verified so often are forever after valuable to the receiver of the information. I think it would be a capital idea to open a column in the AMERICAN HOMEOPATHIST in which every man may give in condensed form any symptom of any remedy that he has verified sufficiently to prove its value. These are valuable to young men starting in the profession and of inestimable value to the isolated fellow who doesn't rub against homeopathic doctors every day. Hints that were given me by older men in my early experience were priceless, and I never prescribe them that I don't think of their kindness to young men

and how easy it would be for all of us to help one another in the same way. Dr. William Hoyt, of Hillsboro, O., once gave me an idea that I never forgot, and it has become rock-rooted, to save many children from that dread disease diphtheria. It is simple yet valuable. When it begins on the left tonsil or fauces give lach. 30x. If it begins on the right give lych. 30x. These symptoms are given by Gregg, but Dr. Hoyt called my attention to it, and I feel that they have saved some cases, and kept others from going on to a malignant form.

Dr. G. W. Martin, my preceptor, formerly of Maysville, Ky., now deceased, gave me merc. cor. for the slimy, bloody stools of dysentery, and many cases have succumbed to its use and rapidly recovered.

Dr. E. H. Peck, of Cleveland, O., gave me conium for the symptom of urine starting, then stopping suddenly, then starting again. Valuable with old men.

Dr. T. A. Wasson gave me verat. ver. and equal parts of water, to be painted on the skin in erysipelas, which is a most excellent remedy.

Pulsatilla.—In rheumatism that shifts about from one place to another, not staying long in any one place.

Rhus Tox.—For "pain relieved by motion," has made many brilliant cures for me and given me the name of being a good "rheumatiz doctor" by some of the elite of the sub-strata.

Cantharis.—For vesicular tenesmus with smarting and burning and a constant desire to pass water.

Esculus will cure or relieve more cases of hemorrhoids than any known remedy, regardless of indications.

These are only a few, and are not new to the older members of the profession, but they come as near being specifics as homeopathic remedies ever get to be.

Materia medica must be taught by fastening the symptoms of remedies to certain conditions, and whenever that condition is seen it will recall the remedy at once. We have all seen how readily we call to mind a man's horse that he is accustomed to drive, even though he may not drive it at the time the habit of associating the two readily recalls the other. So it is with symptoms and remedy. One remedy taught in this way will do more good than a dozen sung out from a rostrum or memorized for a quiz. I could name numberless cases that I have cured coming from allopathic hands with

very simple indications, yet these same indications must be remembered to be applied.

Now let us have a few from the older members of the profession; even though they seem like "chestnuts" to you, they may be valuable to some of the rest of us.

Give them as condensed as possible, and they will do more good than all of this article.



Book Reviews.

Treatise on the Diseases of Women. For the Use of Students and Practitioners. By Alexander J. C. Skene, M.D., LL.D., Professor of Gynecology in the Long Island College Hospital, Brooklyn, N. Y.; formerly Professor of Gynecology in the New York Post-Graduate Medical School; Gynecologist to the Long Island College Hospital; President of the American Gynecological Society, 1887; Corresponding Member of the British, Boston and Detroit Gynecological Societies, of the Royal Society of Medical and Natural Sciences of Brussels, of the Obstetrical and Gynecological Societies of Paris, and of the Leipzig Obstetrical Society; Honorary Member of the Edinburgh Obstetrical Society; Fellow of the New York Academy of Medicine; Ex-President of the Medical Society of the County of Kings; Ex-President of the New York Obstetrical Society. Third edition. Revised and Enlarged. With 290 Engravings and four Plates in Colors. New York: D. Appleton & Company. 1898.

We have fairly revelled in gynecological lore in the past two months and more, since our return from Omaha. We are as familiar now with the name of Tait, and Bantock, and Boze-man, and Martin, and Munde, and Emmet, and Goodell, and Sims, and Byford, and Southwick, and Pozzi, and Ludlam, and a whole hat full more of gynecological celebrities, as we are with Hahnemann, and Hering, and Hel-muth, and Allen, and Farrington, and Lippe, and Dudgeon, and Dake, and Hughes, and that other line of homeopathic teachers and writers which have become unto the present generation as household words. We have studied the different forms of gynecological accessories from the best form of the author's technique, to the latest operating table with uncarved legs and marbleized top. We have

supped full with hysterectomies, vaginal and extra-vaginal; with trachelorrhaphy and col-porrhaphy; with hematosalpinx, and laparo-salpingotomy; with morcellement and ballotement; with ovariectomy and plebotomy; in short, with everything that used to be as Greek to us in gynecology as was the name itself. We have studied the injuries to the pelvic floor until we can almost do the letter H flap-splitting operation with both eyes shut and one hand tied behind our back. We know the different forms of anesthetics and consider ourself top-sawyer on antiseptics and asepsies. We have been almost persuaded a time or two that the beginning of man was bacillar in type—that bacilli are undoubtedly the cause of everything from protoplasm to the last inch. We have studied so much and so many forms of technique that we feel confident we could hold a very learned conversation with any gynecologist who was not acquainted with us, and knew not that we are absolutely ignorant of all forms of medical knowledge except a few remedies and these given very high. Of knots and ligatures and spools and gauze and minor things like these we have enough to stock a small free and upright dispensary. Thus also we are informed on the several stitches, the overhand, the underholt, the continuous and the stitch in the side. We know how each author holds the needle forceps, how he curls the little finger when holding the scalpel, and how the light must shine over the one or the other shoulder of the operator. We have studied the pictures of the several operating rooms and have only now, after a lapse of a few days, been able to divest ourself of their resemblance to some of the torture chambers in the inquisition.

In short, we have made such excellent progress in our desultory browsing that we feel we know a good deal about gynecology, and that with the aid of a good pair of shears, a paste pot, and a kodak we could write a very fair and readable book. We had no thought of going at all deeply into this study when we first opened this new book, but our curiosity was excited by the resemblance of so many of Skene's pictures to those which we have known and become familiar with in other books. Reading here and there to get the drift of the text, as is the wont of perhaps every medical book-reviewer, we are still more surprised to note the familiarity not only of topic but in many places even the language.

But it is an interesting subject, this of gynecology. And we no longer wonder that the average medical student likes it so much better than a dry and musty lecture on *materia medica* read from an ancient and inflexible manuscript.

In the first place, like Byford in his first edition, and our own talented Ludlam, Skene has no use for gynecology in the title. *DISEASES OF WOMEN* is good enough for him. Taking this book as it lies before us, and it is not a new book—being a third edition, and, therefore, the seed for many later alleged manuals and text books, it is one of the newest and best books on the subject by an undoubted master of Gynecology. There is the evidence of ripe scholarship throughout its every chapter; the teacher, too, is apparent; and when one has read through any given subject it leaves the impress of perfection and satisfaction. This was to us especially marked in the chapter on Injuries to the Pelvic Floor with its wonderfully beautiful illustrations, the colored plates and the many others done in plain black. In fact, the illustrations of the whole book have the merit of being original and graphically done. They carry a vivid lesson to any one browsing in the pages for half or three-quarters of an hour. They are never blotched and smoky. There is a total absence of scrimping and miserliness and cheapness in the get-up and make-up of this splendid volume. It is large, clearly printed, and well-bound. The price is as reasonable as that of any other gynecological treatise. Being a homeopath we do not, of course, recommend its therapeutics, but—that is matter for another paragraph or two.

This book, the best of its kind that has reached us this year, is devoted to the promulgation and elaboration of a specialty idea. And the homeopathicity or allopathicity or eclecticity of the saw or the scissors or the speculum or the lie-gating materials has nothing to do with the case. While we distinctly disavow the therapeutics of Skene, we would like to call attention to some of our homeopathic text-books where hypodermatic injections, and drastic purges, and iodoform dressings, and bichlorid douches, and washes, and heart sedatives, and cardiac stimulants, and iodine, and boracic acid, and acetanilid, and teaspoonful doses of heavy tinctures prance up and down and through every page like a medical nightmare; it would, indeed, be difficult to say where allopathy lets go and homeopathy takes

hold. Now there is Ludlam in his *Diseases of Women*—a most practical and excellent work—when he takes up a section or chapter he exemplifies all there is in it, not by quoting learnedly from Sim's to Skene, but by going at it in a practical every-day, work-day fashion and telling us how *THIS* case looked, how *THIS* case behaved, how *THIS* case underwent the operation and what it was—and then in every case weaving the homeopathic remedy so closely into the wool and web of his subject that they become veritable living cases and do not vanish with the closing of the book. But note the difference with many "homeopathic" authors. After detailing and retailing as much of the old school treatment as may be foisted upon a credulous homeopathic reader, they then besprinkle and bespatter and besmear a page or two at the end of the chapter with a hatful of hit-or-miss, cut-and-dried indications for remedies—twenty-five or thirty of them—leaving the inference that all the reader needs to do is to chuck the whole lot into a hat, shake them well, and make use of the first one that is drawn from the bunch. When this form of homeopathic text-book making is considered, is it at all surprising that so many homeopaths buy old school text-books?

Skene's *Diseases of Women* is the work of a master. It is charming in its style as it is thorough in its technicalities. It is more complete than any gynecological text-book which has reached us this year. Its therapeutics will not trouble the homeopath, for if he has been taught Homeopathy in his homeopathic college, he knows that his school of therapeutics is better than all others, and he would stultify himself to use other than homeopathic treatment. He could not be tempted to go backward and resort to the crudities and heaviness of dose advocated by the old school in its therapeutics.

King's American Dispensatory.—New edition. Entirely rewritten and enlarged, by Harvey W. Felter, M.D., and John Uri Lloyd, Ph.M. Two-volume edition, royal octavo, each volume containing over 950 pp., with complete indexes. Cloth, \$4.50 per volume, post-paid. Sheep, \$5.00 per volume, post-paid. Volume I, now ready. The Ohio Valley Co., publishers, Cincinnati, O.

"This issue has been entirely rewritten and is the standard dispensatory of the eclectic school, first issued in 1854. This is the eigh-

teenth edition of the work and third revision of this dispensatory, and it occupies the same position in the eclectic school of medicine as the National or United States Dispensatories in the regular profession. The new edition preserves the important original matter by Professor King found in previous editions, which won for it popularity. In other directions it has been revised and rearranged on every page in conformity to the advances of the eclectic school, and contains much recent matter not found in other Dispensatories."

The above paragraph practically covers the whole ground, hence we have borrowed it. The book is well edited and printed, and the page is large enough not to make the book or books unwieldy. Such parts of it as we have had time to read, and would naturally interest a homeopath, have convinced us of the value of the book, and, barring the dosage, we see nothing to make it other than an acceptable volume for the library shelf of any school of doctor.

Antitoxin Brochure.—We have received a copy of the new 1898 Antitoxin Brochure of H. K. Mulford Company. It is a thorough revision and improvement of that issued last year and is very handsomely finished. It is a valuable reference book on the serum treatment of diphtheria, and should be in the hands of every physician who sees cases of this disease. A novel and interesting feature of the book is a section of official reports on the employment of diphtheria antitoxin, and a complete symposium of what all recent text-books say of the antitoxin treatment. It will be mailed gratis to you upon receipt of request.

Globules.

We shall soon publish a paper by Professor Dr. J. T. Boyd, of Indianapolis, on Phthisis Pulmonalis.

It may be a little belated to say that in a former editorial of ours on the subject of Osteopathy, we had no reference whatever to the Kansas City Homeopathic Medical College. We say this now in order to lay a certain solitary ghost, who has insisted, notwithstanding personal explanations of our own at Omaha, and of his immediate friends and co-teachers, that we had the above college in mind.

Dr. C. E. Sawyer, of Marion, Ohio, conducts a very complete sanatorium, which has been latterly largely improved by the addition of a new building and a beautiful park.

The Fall Cities Homeopathic Medical Association, including Louisville, New Albany and Jeffersonville, meet monthly, read good papers and have excellent discussions. The attendance averages thirty to forty.

A cordial invitation was extended to this editor by Dr. J. H. Kellogg, Battle Creek, Mich., to participate in the Civic-Philanthropic Conference, October 18th to 23d. We have no doubt that the occasion was a success and much of value to our profession resulted.

Our friend and brother, Dr. William Jefferson Guernsey, of Frankford [Philadelphia], has entered the professional market with a "Perfection" Liquid Food, upon which he stakes his reputation as well as his ducats. May he meet with abundant success.

The publishers have arranged with one of their patrons, whose advertisement appears during the month of November, for a list of all physicians who in applying for samples or circulars, mention this journal, and to each name will be sent free a valuable cloth bound book published at \$2.—The Materia Medica of Differential Potency.

The absence of all editorial matter in the Pacific Coast Journal of Homeopathy causes apprehension lest the talented Dr. Arndt has had a relapse. He was quite ill during the sessions of the Institute at Omaha, so that he was unable to come there. Now, mark you, you belligerent publishers, we have'n't said that he is dead or that the Journal has done likewise. Dr. Arndt is a facile penman, and a whole issue of his Journal with no word from his inkstand, makes that issue tame and very school-book-y.

Ward's Island Alumni.—Dr. G. T. Stewart, secretary of the Metropolitan Hospital, Blackwell's Island, announces that the third annual dinner of the Alumni Association of the Wards Island and Metropolitan Hospitals will take place on Wednesday, December 7th. The committee are endeavoring to surpass the previous meetings, which were very successful.

and would request that every Alumnus endeavor to be present. Prominent speakers will respond to toasts and the evening promises to be very enjoyable. Alumni who have not joined the association are earnestly requested to do so.

Professor W. A. Dewey, M.D., announces that he has opened an office [his own] in the Thompson Block, corner of State street and North University avenue, Ann Arbor, Mich., where he will give exclusive attention to nervous and mental diseases.

The Chicago, Milwaukee & St. Paul Railway advertises a direct route to San Francisco, and in its leaflet points out the advantages of a visit to Honolulu and Manila. This road is an exceptionally fine one, well-equipped and reliable. The leaflet is a handsome little descriptive paper, filled with valuable information.

We call especial attention to the publication in this issue of a valuable paper on Acetic Acid by Professor W. A. Dewey, M.D., of Ann Arbor. Those who have not given this remedy any study will be agreeably surprised with its meat-i-ness, in a therapeutic sense, and cannot fail of being impressed with its great homeopathic value. And Professor Dewey has couched the lecture in such excellent phraseology that it proves the more attractive. Instead of running after every little whimsicality foisted on the profession by the chemists and microscopists of the old school, let us review and rehabilitate our old remedies and secure again the success which the former generation of homeopaths scored.

Professor Kent in describing the difficulty inherent in the proper selection of remedies instances the case of a man with an every-seven-days' headache. All remedies having reference to the time period in headaches proved unsuccessful. Finally it was learned that this was a Sunday headache, and that on this day the man ate a great deal of meat. Staphisagria was given and a prompt cure resulted.—Villers' Archiv fur Hom. [The remedy was, as every materia medica student knows, well indicated. But the question will obtrude itself as to whether this headache might not also have been removed by a change in his meat-eating habit. Again, are we to conclude that having given staphisagria, the man was

thereafter immune—that is to say, could he then eat meat on Sunday without the resultant headache?]

The Medical Age of Detroit has been sued for \$200,000 or \$20,000—we do not recall which, though it is of no consequence—by some member of the D. O. fraternity, for grossly misrepresenting the aims and purposes of the Osteopaths. That's an awful sight of hard cash to squeeze out of a medical editor! Afraid we would have to mortgage our high potencies (which are invaluable) in case some of the disgruntled people, whom we have offended in our chip-producing industry, should enter suit against us. Without knowing what the Medical Age has said or done to have damaged an ordinary doctor \$20,000 worth, our sympathies are with the Medical Age and its fearless editor.

Harold Frederic, the correspondent and author who died a little while ago, was a believer in Christian Science; acting in that faith he refused to employ physicians for an ordinarily curable ailment, and, necessarily, died. It is truly singular how a fad, even of the most outrageous kind, may find lodgment in the brain of an otherwise well-balanced and intelligent person. Does not this accent that old line, that if the best man in the world had his besetting sin written on his forehead, he would wear his hat very low down on his nose?

A Barren Joke.—A certain physician to whom autopsies are, as it were, a daily article of professional pabulum, one day entered an aseptic operative theater during the course of an operation. Not daring to approach too near, he was craning his neck to catch a view of the proceedings, when a more than ordinarily well-favored nurse approached him with the remark, "Let me give you a sterilized apron, doctor." The doctor, a man of gallantry, replied, "God forbid that I should take anything that would tend to sterilize me—from you." And that nurse is still wondering what he meant.—N. Y. Med. Jour.

Prejudice Run Mad.—The Philadelphia Medical Journal for October 22d says that according to the Lancet, during the course of the complimentary dinner that the medical profession of Great Britain and Ireland tendered Professor Virchow on the occasion of

his recent visit to England, an anonymous telegram was handed to the illustrious guest, containing the following words: "Get thee hence, vile vivisector! England spurns thee!"—*Ibid.*

Dr. H. F. Biggar has been invited to take part in the Lecture course of the homeopathic school at Ann Arbor with a surgical and possible gynecological portfolio. Dr. Biggar is an omnivorous reader and student of current medical journalism, and therefore a progressive and interesting teacher.

Scribner's has closed its Workers articles. They have been wonderfully interesting and refreshing. A good many of our readers, like ourself, no doubt, would feel grateful to learn why Mr. Wykoff took this tramping tour. We have recollection that it has been already stated, but in so many different ways, that a statement from headquarters would be appreciated.

The Hahnemann Advocate [and successor to the Medical Advocate?] has hit the era of prosperity, so long promised and looked for by all political parties. It says in its last issue that since May of this year it has added 1,200 new subscribers. At \$3 each per annum, this foots up a good round sum. Wish we, and some of the other homeopathic journals, could break in and steal the *modus operandi* for adding 1,200 new subscribers to our journal in times of piping peace.

As we go to press J. E. Blackburn, Ph.G., of Belmont County, present Dairy and Food Commissioner of Ohio, is in the throes for reelection Nov. 8. Any of our readers who are acquainted with the fearless warfare which this official has waged against the quack medicine industry in Ohio need not be told that these vast corporations, having been unable to unseat him because of his fearlessness, will now combine their money and influence and seek his destruction at the polls. But will the voters of Ohio permit this? We hope not. We hope that every physician in Ohio, regardless of school or sect, will stand shoulder to shoulder with an honest official.

The Stallman Dresser Trunk is one of the handiest of traveling paraphernalia extant. Everything at hand.

J. Heber Smith, M.D., of Boston, died in this city of heart disease Sunday morning, Oct. 23. He was born in Bucksport, Me., December 5, 1842, and was the son of Rev. Joseph Smith, a somewhat widely known Methodist clergyman in New England. He graduated at the Hahnemann Medical College of Philadelphia in 1864, as the valedictorian of his class. For more than thirty years he had been an active member of the American Institute, the Massachusetts Medical Society, of which he was elected president in 1884, and of the Boston Society, to all of which he contributed valuable papers.

Just the Place for a Bridal Trip.—Take a cruise to picturesque Mackinac Island, nine hundred miles of lake ride, and it only costs \$17.00 from Cleveland, \$15.00 from Toledo and \$12.50 from Detroit, round trip, including meals and berth. New steel steamers. Send two cents for illustrated pamphlet. Address A. A. Schantz, G. P. A., D. & C., the Coast Line, Detroit, Mich.

And if you go, you newly married people, why not take with you *Sanicula* 50m to cure inveterate nausea? Champagne on crushed ice is also good. Oxalate of cerium is cracked up a good deal.

With reference to Dr. Prichard's remarks on cod-liver oil it may be pointed out that in a footnote on *lac asellæ* in *Selecta e Prescriptis* the following appears: "Asellus signifies a little or young ass. This word has been extended to fishes, as the cod (*morrhua vulgaris*), which have the color of the ass. At least, Varro, in speaking of fishes named from their color, mentions the *asellus*, or cod, as deriving its name from this circumstance. Those therefore who trust to a dictionary might not be able to tell whether *oleum jecoris aselli* meant the oil of a cod's liver or the oil of the liver of an ass. In 1839 the latter translation was actually adopted by a writer in a medical journal, who gravely told his readers that the Germans had been using oil of asses' livers for fifteen years!"

The American Homeopathist.

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The American Homeopathist.

NEW YORK, DECEMBER 1, 1898.

FRANK KRAFT, M.D., EDITOR, CLEVELAND, OHIO.

OUR PORTRAITS.



FRANK VICTOR HORNE, M.D.,
Toledo, Ohio.

Is Hare *Materia Medica* and *Therapeutics* a proper text-book to recommend to a class of homeopathic Freshmen and Sophs?

Is it the proper thing for a teacher in a homeopathic school to publicly deride the practice of a brother of the profession? Notably as it refers to practice in potentized drugs, when such are indicated?

Is a mixture of gelsemium and camphor rubbed up in sugar of milk and recommended as "good for colds" in babies a homeopathic remedy?

Is there nothing left for homeopathy to do in modern medicine except what the homeopathic (?) combination tablets have not already shown their efficiency in correcting?

Is Homeopathy to be merely an insignificant half hour, poorly filled at that, by recent graduates, or by antiquated manuscript-reading teachers?

Is bacteriology (and operations) all there remains of the Practice of Medicine in this enlightened age of the world?

Is it worth while expecting homeopathic doctors when we send our students to schools of which we know naught but the reputation of the surgeon or the ophthalmologist?

Is it justice to our student to start him wrong in the path of medicine—when he may fall by the wayside of homeopathy, be taken in by the allopaths, and so, later on, rend his own household?

Is it Homeopathic practice to give aconite in every case of fever, regardless of patient or disease?

Is it right for a homeopathic college professor in any of his hours or clinics, or at any other times, to recommend the use of combination-tablets or alternation of remedies?

Is it right and just to call on an indifferent *materia medica* moulder, "after the holidays," to give a complaining and memorializing class another hour of gynecology?

Materia Medica Miscellany.

Conducted by J. PERRY SEWARD, M. D., 113 West
Eighty-fifth Street, New York.

References in this department are made by number.
See issue of January 1, or December 15, of each year.

Tuberculinum in Post-Scarlatinal Nephritis.

Dr. H. Sambrecht, Jr., ²² ²⁶ considers the tuberculin of Koch essentially homeopathic to acute nephritis, producing as it does fever, renal pains, albuminuria, and hematuria. He reports the following observations: "Last November I was called to see a child aged ten years, who presented considerable edema of the eye-lids and the lower extremities. The urine was scarce, dark in color, and contained a large proportion of albumen and a small quantity of blood. In questioning the parents, I learned that the child had been attacked fifteen days before with a light fever, with sore throat and redness of the skin. These symptoms were so little pronounced that they had passed almost unperceived, and the child had continued to play in the street as usual, when he had been suddenly taken with shivering, and with general uneasiness, thirst, inappetency, then very soon the edema of the eye-lids and of the malleoli appeared. I commenced the treatment by mere. corros.; I then administered successively cantharis, arsen. alb., and phosph., without the least result. The disease continued to become worse. The swelling of the legs was considerable, and upon an examination of the stomach I ascertained a notable quantity of liquid in the peritoneum. I then prescribed tuberculinum 6x. Under the influence of this remedy, the symptoms improved rapidly, and at the end of fifteen days the child had completely recovered. Tuberculinum has been of great help to me in many cases of post-scarlatina. It failed in one case; the patient succumbed to uræmic accidents."

Calcarea in Chronic Bronchitis.

A school girl, aged fifteen years, has had a cough pretty constantly for eight years, and as a last resort consults an homeopathic physician. Cough loose, rattling, caused by tickling in the throat.

Aggravation from laughing, coming into a warm room, during the night when she often coughs without wakening.

Expectoration thick, usually swallowed.

Subject to frontal headaches, worse from motion, and when severe accompanied by acid vomiting.

Vertigo if she arises quickly from a recumbent position, especially in the morning.

Thick, greenish nasal discharge.

Feet always damp and cold.

Sleeps late and is languid in the morning; feels well and wide awake in the evening.

1898, March 11.—One powder calcarea carbonica cm. (Fincke), dissolved in four tablespoonfuls of water, one tablespoonful night and all morning until it is gone.

This worked a miracle in the case and converted a family to faith in Homeopathy. The cough was cured.—E. E. Case, M.D., in Med. Advance.

Bromoform Poisoning.

Dr. Larkin W. Glazebrook, Washington, D. C., reports an interesting case.³⁵ L. W., four and one-half years old, developed pertussis. She was given three drops, every three hours, of a fresh preparation of Merck's bromoform, which was continued for three weeks. Paroxysms, never severe, were improving, although three or four occurred during the twenty-four hours. The child got hold of the dropper, containing fifteen drops, and introduced the contents in her mouth. She had already taken the three-drop dose of the medicine. Ten or fifteen minutes later the child was seen to lie down on the floor, as if asleep. At midday, she did not respond to the dinner bell; the attendant attempted, but failed to arouse her. The child was then limp and apparently unconscious, though breathing quietly. Involuntary evacuation of bowels and bladder had taken place. The matron administered the white of an egg, and 12:15 p. m. the child vomited twice. Dr. McGee arrived five minutes later and found the child collapsed, cyanotic and apparently dead. Artificial respiration, removal of large quantities of mucus from the mouth, antidotes and stimulants, restored the child by 4 p. m.

During the toxic stage, the symptoms were most alarming—resembling the threatening narcosis occasionally seen in chloroform administration. Pupils only slightly dilated, conjunctival mucous membrane inflamed, blood pressure markedly diminished, cyanosis resembled very much that caused by administration of nitrous oxide gas.

It is interesting to note that the child has

never manifested any symptom of pertussis since then.

In bromoform poisoning the general reflexes are entirely lost. There is general pallor, dilated pupils, collapse and heart failure. In several cases, when used as a general anesthetic, Von Horock has noted general cyanosis, especially of the face. Urine at times contained bromine. Benome and Mazza noted that the narcosis is slowly developed and passes off slowly. They refer to it as a possible valuable anesthetic, and have noted irritation of conjunctivæ and nasal mucous membranes.

Sepia for Corns.

A nervous, dark-haired school teacher, age twenty-eight, whom I have never seen, is tormented with corns.

Red swelling around the corns; pain worse before a storm and from heat.

When the corns are most painful there is also pain from the right hip down the thigh.

Morbid brooding over imaginary troubles. Conjunctivæ yellow.

Dark circles under the eyes. Lips colorless. Sallow complexion. Tongue pale, flabby.

Heavy, dragging sensation, with pulsation in region of the liver; relieved by lying on the right side with knees drawn up.

Bowels constipated. Stool never satisfactory, feels that more remains.

Nervous when in company, especially if strangers. The stomach will become painful as if knotted up, ending, when she gets by herself, with a sinking sensation in the stomach, with nausea and faintness.

1897, June 14.—One powder *Sepia*, 3 cm. (Fincke), dry on the tongue.

July 27.—She writes: "Five corns have already peeled off. I have not had such comfort with my feet for many years." Her health also improved rapidly with a return of old symptoms, proving the correct adaptation of the remedy.—F. E. Case, M.D., in *Med. Advance*.

Lappa major in Skin Diseases.

Lappa major will cure, absolutely, many cases of eczema. It will not cure every case, there is no perfect specific in medicine, but if used intelligently it will help nearly every case. It will also relieve some cases of eczema of the face and body, but its principal range of beneficial action in eczema seems to be upon the disease when it attacks the scalp. In private

practice we frequently meet with young ladies who are worried about an eruption on the face and neck, pimples that they cannot conceal with creta preparata or other cosmetics. For these cases I keep a quantity of burdock roots on hand, and when they apply for relief I give them one of the roots with instructions to soften it in water for a couple of hours and I then to apply it to the eruption by rubbing the blunt end upon each particular pimple. It is a great success. It clears the face and neck of every deviation from the normal color and texture in a month. The patient is instructed to use the root once a week, but not oftener.

The common burdock (*Lappa major*) is indigenous to North America and may be found in vacant lots in every city in the union. It selects a rich soil in which to reach perfection. The seedling roots are the ones used in treating these cases. It is easy to distinguish the seedling roots from those of the previous year. I gather the roots in July or August, as at that time they contain the greatest amount of active medicinal properties.

Iodine in Pneumonia.

Dr. W. T. Laird² finds iodine particularly valuable in the third stage of pneumonia, when resolution is long delayed, and the fever assumes a hectic type, with severe chills, sudden and excessive variations of temperature, and profuse sweats. As an example he cites:

Roy B., a rather delicate boy, ten years old, was attacked with whooping-cough about the 1st of March, 1893. Some three weeks later an imprudent exposure brought on catarrhal pneumonia. Under *verat. vir.*, followed by *bryonia*, the disease pursued the usual course, and by the 1st of April the patient seemed to be convalescing, when he took cold and had a relapse. He again improved slowly under the usual remedies until April 15th, when the furnace fire accidentally went out during the night. He awoke in the morning thoroughly chilled, and had a second relapse. This time he did not rally, but steadily grew worse. At the end of the fifth week of the disease one-third of the left lung was still hepatized, and there were also scattered patches of consolidation in the right lung. The cough was slight and expectoration scanty. The sputum, examined under the microscope, showed mucous corpuscles, broken-down lung tissue undergoing fatty degeneration, and a few Koch's bacilli; but no pus could be detected. Every

morning he had a chill, followed by high fever, the temperature, which was 96° at the beginning of the chill, rising to 105°, 105.5°, and on one occasion to 106°. This, in turn, was succeeded by profuse perspiration, during which the temperature gradually fell until it again reached 96°, about 9 to 10 p. m., when the cycle of chill, fever and sweat was repeated, and lasted through the night. Sulphur, hep. sulph., and sanguinaria were given without effect. Another physician was now called in consultation, and at his suggestion calc. phos., and afterward calc. carb., was tried, but with equally unsatisfactory results. At the end of the sixth week the patient was in a critical condition, and was slowly but surely losing ground. Iodine was now prescribed, ten drops of the tincture in a glassful of water, a teaspoonful every hour. Two days later he had only one chill during the twenty-four hours, and the range of temperature was reduced one-half, the maximum being 100° and the minimum 97°. The medicine was now given every two hours. In three days more the chills, fever and sweat disappeared, resolution commenced, and just twelve days after the first dose of iodine was administered the boy was discharged cured.

Arsenical Pigmentation.

Dr. Hardaway²⁸ reports two cases of this pigmentation: One case, male, aged twenty-five, occipital neuralgia, took Fowler's solution in three drop doses and increased to twelve drops three times a day, when a conjunctivitis was produced. The larger dose was continued for five days, when a maculo-papular eruption, pin-head in size, appeared on the thighs, over the buttocks and lumbar region. The arsenic was then stopped and there was no extension of the eruption. The lesions grew larger, coalesced, some acquiring a diameter of one-sixth inch and slowly changed to a dark-brownish hue, followed by desquamation. At the time of consultation a general brownish discoloration of the skin was observed and appeared to be made up of small macules. The patient's complexion was a sort of dark indian-red hue.

The second case was in an epileptic girl of about twelve years, who had taken arsenic for a long time. A morbilliform rash was followed by a dirty-brown or grayish mottling of the skin, with accompanying desquamation.

In both cases the pigmentation was limited

to the seat first occupied by preceding red rash. Had the rash been of a diffuse scarlatinaform type the pigmentation would, in all probability, have been correspondingly diffuse. The writer had previously regarded arsenical pigmentation as a gradual process, of a more or less uniform staining, and not preceded by congestion or inflammatory changes in the cuticle.

Melaleuca viridiflora.

M. Dubousquet-Laborderie²⁷ calls attention to this tree, which is found in New Caledonia, from which an essence is obtained resembling that of eucalyptus. In pulmonary tuberculosis, administered by the stomach in dose of ten capsules (each four grains) daily, it gives rise to no disturbance. An oily emulsion of 2 per cent. strength can be given hypodermatically. In this disease cough, expectoration, and fever cease and the weight increases. In coryza and tonsillitis, inhalations produce remarkable sedative effects. In diseases of the urinary apparatus excellent results have been obtained. In one instance albuminuria disappeared. In cystitis and prostatitis, irrigation with a 2 per cent aqueous solution is advised. For rheumatism and neuralgia local frictions are recommended. For wounds a 5 per cent solution, for burns double this strength, produces an agreeable coolness and hastens healing.



HOMEOPATHIC INSTRUCTION.

The following incident, coming to the knowledge of the writer, is pregnant with interest. Said the correspondent:

In consultation a little while since, the attending physician, on being asked if he had thought of lachesis in the presented case answered that he knew nothing of lachesis. His professor, he said, did not believe in lachesis; nor had he any use either for natrum mur. or sulphur. And because of this wooden-pated, self-satisfied professor a patient lay at death's door! Questioning farther, it was learned that ferrum phos. and aconite, both very low, had been given in this case, in alternation, not upon any specially presented indication for either of the two remedies, but because—after having TRIED a number of drugs upon the case without success—he had recalled that once, while in the dispensary of his alma mater, a member of the faculty had extolled the supereminent vir-

tues of the two remedies in alternation; and the attending physician, referred to in this article, believed that possibly the combination might do good in the fever of the patient before him. Was he taught alternation at his college? Oh, no—or, rather, not in just so many words; but there were always little asides and stage whispers that the class picked up in the corridors in the trail of the departing professors which pointed most pointedly in that direction. Almost all the class had got into the way of alternating. Didn't the teacher teach the single remedy? Well, yes, possibly he did; rather think he did. But the class knew that he was not a successful physician in practice, had no practice to speak of, so that it took no stock in his recommendations; besides, he read from manuscript, which some of our preceptors said was old when they sat on the benches. There was nothing in the lectures that we could hold on to. Every remedy had headache and stomachache and cold feet. You could never tell one from the other. It was nothing but symptoms and symptoms and yet more symptoms. And the quizzes were of the medical-martinet order. He insisted upon the return to him of his exact language; he wanted a phonograph perfection; and once marked a man down for giving him the word "fright" instead of "fear" in the aconite quiz. ORGANON? Never heard of it. Therapeutic clinic? None. Was he taught how to examine a patient for a homeopathic prescription? No. Fact is, volunteered the attending physician, the class was so disgusted with his way of teaching, that a number of them rebelled and petitioned for a change. It didn't go. The faculty stood together.

What little we learned outside of surgery and gynecology—and these were always first-class and of the latest order—we picked up in the various clinics and lectures from other chairs.

The pity of it, Iago! Oh, the pity of it!



Is it any wonder that the surgeon and the gynecologist, the neurologist, and the other modern specialists have such willing and enthusiastic classes and turn out such good material, when the college-corporation puts forth its every effort to secure the most able men in those and other specialties, and uses lavishly of its funds to provide all needed instruments and accessories to make the work attractive,

and, consequently, successful? We show the class how to sprout potatoes and raise colonies. We show them how to look for red and blue bacteria through a glass dimly. We fill them with big names. We teach them how to use the hypodermic syringe. We teach them all the old school terms and technicalities so that if called in consultation with an allopath they may not stand barchaded and abashed before the greater man and older brother. We show them how to light up with glow lamps the stomach and bladder and the antrum high-morianum. We teach them the unknowable wonders of embryology, and explain learnedly and in a sufficiently hushed and awe-stricken voice the Origin of Species from the head-and-tail-wig-waggle to the moment of dissolution in decrepit old age. We teach them the very latest and best in Anatomy, Surgery and Gynecology. But when it comes to teaching them homeopathy in a homeopathic school, why, good lack! any likely graduate or two of a year before last's crop is good enough; or some superannuated fossil with the methods of a generation's mildewing is permitted to mumble and stumble and tumble through his ancient papyrus! Oh, that's all right. Homeopathy is not what it was in the infancy of the school. We have advanced and improved since Hahnemann discovered it. Now-a-days homeopathy has been measurably simplified. All one has to do now, is to find, by way of the microscope, what specially long-handled-named microbe is biting the patient, then give the combination-tablet, in all such cases made and provided, and let the thing work out its own salvation, or operate, or, go to! Who cares? Folks must die sometime or other! It was all right enough fifty or sixty years ago to publish comparative statistics to show that homeopathy was better than allopathy in general practice, in hospitals, in jails, or in insane asylums. But now, since the microscope has shown us the wonders of bacteriology, and the gentlemanly pharmacal people are providing us with properly prepared serum and tablets, there is no longer any need to "bone" on materia medica, especially when that teacher may be "still voting for Jackson"!



The Southern Homeopathic Medical Association.

The Southern Homeopathic Medical Association has held its fifteenth session at Birmingham, Ala. For the many who were called

and with one accord made excuse the exclusive few who were present have only profound and deepest commiseration to offer for the delightful, interesting and altogether lovely meeting which they missed.

The Southern may hold other meetings, more largely attended, with more learned papers, more eloquent discussions, with more college professors to add dignity and distinction to the crowd of every-day doctors, but never again can it manage a more cozy, jolly and all-round good time than at the meeting just closed.

Our President, Dr. Lizzie Gray Gutherz, presided gracefully, efficiently and beamingly, just as those who know her expected her to do.

The Birmingham doctors made us heartily welcome, their friends assisting, even the "Regulars" of the profession extended a cordial hand and smiling welcome.

The press was unusually courteous, devoting its best columns to our doings.

The papers presented were excellent, practical and full of matters for discussions which were clever, impressing, prolonged and even funny.

Only was lacking, the doctors who didn't come, and to them—our condolences.

At the evening reception we were entertained with music and dainty refreshments, and then Doctors Gutherz, Stout and Walton entertained our entertainers with clever, happy speeches.

Among the fortunate and faithful ones present were Dr. Hallman, of Hot Springs; Dr. Stearns, of Washington; Dr. Henry, of Montgomery; Dr. Mead, of Cincinnati; Dr. Susan Hicks, of Atlanta; Dr. Whitman, of North Carolina, and Dr. Duffield, of Huntsville.

The officers for next year are: President, Dr. A. N. Ballard, of Birmingham; vice-president, Dr. V. H. Hallman, of Hot Springs; second vice-president, Dr. George S. Coon, of Louisville, Ky.; recording secretary, Dr. Lizzie Gray Gutherz, of St. Louis; corresponding secretary, Dr. Frances McMillan, of Nashville; treasurer, Dr. A. M. Duffield, of Huntsville; censors, Dr. S. S. Stearns, of Washington, D. C.; Dr. Susan M. Hicks, of Atlanta, Ga.; Dr. John H. Henry, of Montgomery; Dr. W. W. Clapp, of Birmingham, and Dr. P. H. Scott, of Jacksonville, Fla.

A dividend on the meeting for next year, and a pledge to make that meeting a success, were adjourned. FRANCES McMILLAN, M.D.

COLOCYNTII OR OLIVE OIL, WHICH?

FRANK KRAFT, M.D.,
Cleveland, Ohio.

About noon of Monday, October 31st last, a young man of twenty-five came to my office doubled up with pain. As he came up the steps in a labored fashion he was crouched forward and to the right supporting his right abdominal region with his right hand. History: no bowel movement since Saturday; Sunday evening being alone, all the rest of the family away at church, he repaired to the pantry and filled himself with cold meats and foods, feasting especially on a large plate of baked beans. Some time during the ensuing night he was awakened by fugitive pains in the appendicular region. He at once attributed the disturbance to the beans, prepared a cathartic and took it. When he awoke Monday morning he was a trifle easier, but there were frequent reminders of latent trouble. Still no evacuation of the bowels. He went to his work down in the city, but at noon was taken suddenly with sharp, cutting pains in one circumscribed spot, so that he was obliged leave his work and find his way home. Several times during the trip he nearly fainted, and one or more times he stepped to the rear platform to vomit. He was in such exquisite agony that the very touch of his clothing gave him pain. What little relief he got was from bending forward and to the right. When he reached my office he asked for something to ease his awful pain, and something that would put him to sleep. It was difficult to get a connected story of causes from him. He could not stand straight even long enough to be examined. I became well convinced that I had a case of appendicitis to deal with since it presented all the classical symptoms of that fashionable malady so graphically depicted by my friend, Professor Crutcher, of Chicago, in his invaluable little book on Appendicitis. But what was to me much more interesting was the clear cut colocynth picture it presented. I gave him a dose of the latter at once and prepared a solution of the same to be taken in water a teaspoonful every half hour until six doses had been taken. Meantime lie down, apply hot olive oil to the surface of the painful region. If at the close of the sixth dose he was not decidedly relieved, abandon that medicine and begin the taking of olive-oil, a teaspoonful every half hour until I could visit

him. When I did call in the evening I was unable to get into the house, but learned later that the young man was asleep. So I did not disturb him. On Tuesday about 11 a. m. the young man came to my office ready to pay his bill. Bowels had moved in the early morning. Some time yesterday afternoon, he said, before he had taken his sixth dose of the medicine in the glass he had become comfortable. But as his bowels had not yet moved he concluded that the oil would do him no hurt, and he had taken the prescribed doses until he was asleep. And that was the end of my appendicitis case.

The answer of my critics will be at once that, being a *materia medica* teacher, a user of the higher potencies (when indicated), and a rabid opponent of ALL operations, I didn't know a case of appendicitis when I bumped up against it in broad daylight. This is the usual criticism which meets me or any of my intrepid friends when I sometimes give a little passing evidence of having once polished the hard benches of a homeopathic college under the tutelage of such eminent surgeons and physicians as Scott Parsons and W. B. Morgan, of St. Louis, and Fahnestock, now of Dunham, and that I stood fairly clear in my record on surgery. It is a fearful accusation, this, to have written and nailed over one's head: that he is a mere *materia medica* man and user of high potencies: necessarily thereafter he is anathema as to surgery or gynecology or any else but the two-drachm bottle filled with No. 6 pellets saturated with the twenty-eighth millionth of Moonshine, a single dose each twenty-fourth of the month at ten minutes past four in the morning. Only a few days since the lecturer at a homeopathic college made oblique reference to a case he had seen of a lady with a pus tumor in the rectum which a "prominent *materia medica* man and editor" had been treating for months for "malaria" without ever making an examination of any part of the body,—feeding the poor victim on high potencies! The oblique shaft had its intended effect. The members of the class whispered each to the other "that's Kraft"! Now, if there is one thing in which I am more headstrong than my belief in the better healing quality of homeopathy over any other system of medicine, it is the fact that I never consider the special tag which pathological subscribers (of the pattern of this converted-from-allopathy lecturer) have affixed to certain ailing parts of the body. I have taught and practiced the totality-of-the-symptoms until I have been

nicknamed "Totality." So that it will go almost without saying that I did not treat this or any other patient for "malaria." And, further, that my office practice is in the main an examination and local treatment practice. Besides all this, this lecturer had no intention of telling the truth in his narration of the case and succeeded. Pardon this momentary lapse into a personally-conducted narrative. But it does make me warm to have such nonsense talked by men who really know better, and all because I believe pretty closely in the Hahnemannian Homeopathy and do not rush every bellyache into the gynecologist's hands.

I was so sure of an operable case of appendicitis that I began to look up the telephone numbers of several of our excellent and eminent surgeons in order to have the work done quickly. I did not leave my office to be gone over an hour at any time, expecting to be recalled by the probably increasing agony. But the case was spoiled either by colocynth or the olive oil. It doesn't matter which. The young man escaped the mutilation of the surgeon's knife, has saved the surgeon, hospital and nurse fees, and his family possibly also another fee.

My fee he did not escape. It was two dollars. And the same has been paid.



AN OPIUM CASE,

HARRY E. KOONS, M.D.,
Danville, Va.

In a recent issue of THE HOMEOPATHIST I saw an article by a classmate of mine on a very intractable skin disease. In this, my first attempt, I desire to report a case, not from the abundance of my scientific knowledge, but in hopes that the mistakes I made may help some other young brother to avoid similar ones.

I was called to M. A. who had never had a homeopath before, but whose family had. He is rich and influential and his first words were, "Now, Doc., give it to me strong." He complained of nothing but extreme vertigo, worse on moving the head or raising it and great drowsiness. He would rouse up and answer correctly, but in five minutes he was asleep again. Tongue normal, pulse ditto, temperature ditto. No jaundice, no pains except slight frontal headache. Was mad when they waked him up. Abdomen showed nothing but a slight enlargement in region of ilio-caecal valve, which was painless, freely mova-

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He had all the appearance of incarcerated flatus. I diagnosed the case as gastric vertigo with intestinal fecus; and as the man had been a whiskey drinker and tobacco user, and had taken a lot of opium I gave him *nux 3x* every four hours. Next morning condition unchanged, only lump was larger. Asked after urine, and was told he had passed some water, but did not pass much even in health. Stupor continued. 10 p. m. condition unchanged. 1200 drops of tea drops every two hours. Next morning stupor worse. Lump had come to the middle of the abdomen and extended from navel to umbilicus, a very dull and hard indurated mass. Freely movable from side to side, but not up and down. Patient said he felt as though he were sinking away." Used catheter and drew out three pints of urine and the stupor ceased. He said his head felt as though it were heavier than all the rest of his body. After three days sent him opium 30x and in the evening finally knew my patient. He had passed over three pints more water, stayed awake four hours, beginning from second dose of medicine and water not passing till after third dose. Had eaten some supper and went on to go on the ventilator every six days, then to lie in his bed in two. For the slight remaining vertigo I gave him *nux vom. 3x*, which soon cleared it up.

What I wish to call attention to in this case is the entire absence of symptoms of retention of urine and the peculiar location of bladder during first two days. The patient insisted he had passed some water every day; yet a rubber catheter would not pass, and I had to use considerable force with the steel one. Also the symptom of "sinking away," when otherwise the case caused no apprehension. I have since had two other cases both of which gave me that symptom. In these cases there was an entire absence of any pain in the bladder even when asked about it. I believe there was a spasm of the sphincters with a semi-paralytic condition of the fundus.



Is a monopoly college corporation blameless if its graduates do unhomeopathic things professionally and excuse such wrongs by quoting the homeopathic professor's dictum?

Is modern Homeopathy anything else than allopathy with a good deal of water added to it, palatable pills and potions in place of the under table spoonfuls of nastiness of a few years ago?

Another fact which can be noted as illustrating the onward progress of homeopathy is the continued prosperity of our colleges throughout the land. In spite of long-lasting financial stringency there has been no marked diminution in the number of those desiring to study homeopathy. We do not know the figures as to the entering classes in other institutions, but in the Hahnemann College of Philadelphia the number is slightly in excess of last year.

This is peculiarly gratifying at this time, for it shows that at least that part of the resolutions passed at the last session of the State Society relating to the continued confidence of our profession in the College and its instructors is being verified. Of course it was hardly to be feared that anything, when impartially investigated, would be able to shake the confidence which this institution has enjoyed for fifty years, or could in the least detract from the reputation which it has made for itself, and which it is to its own interest to preserve untarnished. Its present prosperity in a city abounding in medical schools, and the prosperity of the other now so numerous homeopathic colleges elsewhere, are striking proofs of the recognition which is accorded to the medical training given in them.

[Glad to hear of it! Old Hahnemann ranks deservedly high. It has specialists in the best sense of that much-abused word, in every important chair in the faculty. It is a real homeopathic college. Ann Arbor is another school which has passed its last year's poll of students and looms up well. The New York and the Boston schools are also up to date. And doubtless there are others. Send your students to HOMEOPATHIC schools, brethren of the profession! Don't be lulled into a sense of security by a long list of un-Notabilities—seventy men and One Woman, composing some of the faculties. Investigate your colleges! Gentlemen—Investigate!]

The Chironian.

The curriculum for the current college year [New York Homeopathic Medical College and Hospital] shows several changes from the last year's course of study and has been highly commended on all sides for the progressive spirit shown in its make-up.

In the Freshman course the

lectures on *Materia Medica* by Professor T. F. Allen and Hygiene by Professor Charles McDowell are also new and welcome additions to the first year.

But few changes are noted in the second year work, the main addition being the lectures of Professor E. H. Porter on *Physiological Materia Medica*.

The Junior year has an admirable schedule of studies. . . . the department of *Materia Medica* has gained the valuable services of Dr. W. I. Pierce, who will lecture on the rarer drugs, the polychrests and more common drugs being, as of yore, in the province of Professors Allen and Shelton. . . . Professor T. F. Allen will deliver a course of lectures on *Homeopathic Philosophy*, with the *Organon* as the text-book, which promise great enjoyment.

[Now here is a homeopathic school noted for its surgeons, gynecologists, obstetricians, and other of the specialties being of the first order of excellence, that yet believes in homeopathic medicine and homeopathic teaching. It believes that the time to build a homeopathic man is at the beginning of his homeopathic life—in the Freshman year. It does not turn him over to incompetent year-before-last's graduates, who pump him full of allopathic names and formulæ, and then in the junior and senior years hopes to undo the evil by reading fifty or more homeopathic remedies to him—remedies so old and dead that they should have been put out of sight years ago. Dr. T. F. Allen, author and teacher of *materia medica*—known in every homeopathic office the world over—doesn't think it beneath his notice to lecture to Freshmen. Of course, he doesn't! Dr. T. F. Allen is a homeopath! And he has also incorporated a course of lectures on *Homeopathic Philosophy* and the *Organon*. That is showing the right spirit! No reading by the class of a few paragraphs once a week in a perfunctory fashion without head or tail, neither living nor dead—picking out isolated statements, and discountenancing by implication all others that breathe a little of the Hahnemannian fervor. We are glad also to refer to Dr. E. H. Porter, so well and favorably known as the General Secretary of the American Institute of Homeopathy, and editor of the *North American Journal of Homeopathy*, who has extended his lectures on *Physiological Materia Medica* to the Sophs. We

agree with the Chironian in believing that this series of lectures will be first class and eminently homeopathic, as is Dr. Porter himself. His idea of physiological *materia medica* is not to advise the purchase and diligent study of Hare and Potter, the other old school authorities, in order to be perfect in Old School medicine, and thereafter be able to say that the graduate is able to practice "both ways." Commend us to this progressive homeopathic school; it understands the meaning of the word Science.]

Homeopathic World.

[Quoting from *Invention*.] Under the title of *The Single Drop Dose Cure*, we find an elaborate but well written sketch of Dr. Robert T. Cooper's "*Arborivital Medicine*."

The foundation of Dr. Cooper's idea cannot be better expressed than in his own words. He says: "All animal life is derived from vegetation. It has been philosophically asserted that man is but the expression of the soil, but it is equally, nay, more obviously true, that all vegetation is but the expression of the soil. From a scientific point of view, animals may be said to be moving vegetables; and the more science advances, the more difficult it becomes to define what is an animal and what is a vegetable.

"Man's life, then, being derived from vegetation, and vegetation being placed upon the earth, so to speak, to prevent the calamities that, without it, would occur, it is not unreasonable to suppose that there must be running through vegetation a force capable of neutralizing diseases, just as we know that there is material for the supply of bodily wants. That force is, I assert, the growth force, or, if you like it better, the plant force, to be found in the vegetable kingdom. In other words, the life force of plants is capable of exerting a curative effect upon the diseases of animal life."

He defines an "arborivital dose" as a "single drop of the preserved juice of a fresh plant that is allowed to expend its action till no evidence is forthcoming of this action." He finds that "single drops of living plants, not subjected to any special preparation, are often followed by great and beneficial change in the human body not obtainable in any other way," and adds: "I can say that during the thirty years I have been in practice I have never seen such complete and satisfactory cures of obstinate and chronic disease as I have since I relied upon a single dose of medicine, allowed to act

in its own way, and uninterfered with by additional doses of the same or of other drugs."

[If we did not know Dr. Cooper personally to be a first-class, conscientious homeopath, we might feel that his assumptions and conclusions were exceedingly bold and eclectic. But we met and conversed with Dr. Cooper, and with many others who know him well, and the conclusion was irresistible that his work was homeopathic and therefore successful. He had quite a tilt in the London Homeopathic Congress (1896) with Dr. Leon Simon on the merits of sulphur in fevers. Dr. Cooper, unlike some of our professed (American) homeopaths, believes in and uses sulphur, and with excellent results. England has another original medical man in Burnett, whom we also met and after an interview and inquiry of others, concluded that the cures he reports in his several little handbooks are genuine and worthy of imitation. But above all to be remembered and to be especially regarded is the paradoxical fact that both of these gentlemen are exponents of the medical side of the profession, and (consistent) opponents of surgery. The latter not because of a horror of butchery and mutilation—though that of itself would be commendable—but mainly because they have found in medicine the panacea and corrective. And what is true in this special relation of these two men, is true of the English homeopathic profession. They are all educated homeopathic physicians with surgery as an annex—an emergency department.]

Minneapolis Homeopathic Magazine.

The mismanagement of the medical department of the army has been so notorious that we have refrained from commenting thereon. But when a veterinarian, who, even though he be a graduate of the medical department of the University of Pennsylvania, has directed his practice to animals, when such a person is made medical director of a camp like that at Chikamauga with sixty thousand men under his care, and simply because he had influence, and had treated successfully Mrs. McKinley's pet animal, is appointed, it is time to raise a very strong objection, and insist that the investment of so much money be made something more than a mere whitewashing.

Heard a certain friend loose on white pills for some time, continued trying it on a dog. Then you know how the lady Judge of Victoria—especially those who have sent in a

stiffish kind of bill: "Why, that fellow isn't fit to doctor a cat!" Well, here is a "fellow" who was fit to doctor a dog, and received his greater reward. Well, kissing goes by favor. One thing, to be especially marked and remembered, as growing out of our Humanity War, is that homeopaths have in a number of instances been permitted to go into the army. And for this relief many thanks. Secretary Alger has been made the scapegoat of all the devilish incompetency of a red-tape medical aristocracy. In one sense, of course, he is liable to censure. But let us complaining medical men look sharply at what Alger himself did for us as a profession, and we will cease throwing caustic language at him. The more we read of the incompetency of the "War Department" the more we are convinced that the incompetency is something over which Secretary Alger had practically no control.

Let us not forget the powerful influence that red tape medical aristocracy wielded with Cleveland concerning the site for the Hahnemann monument at Washington. Personally we know that President McKinley is not averse to homeopaths and so neither is Secretary Alger.]



DIFFICULT OUTLINES OF THERAPEUTICS.

THOMAS C. DUNCAN, M.D.,
Chicago, Ill.

In my article on the Obstacles to the Employment of Homeopathic Therapeutics I cited the facts that the materia medica was not arranged as we meet disease expressions, and that there was no sequential order of effects for the therapist to make his selection according to similia.

I hope that I made clear the idea that drug study was as separate a study as dietetics. In practice (therapeutics) we are expected to parallel (1) a given disease train of symptoms with (2) a similar train of drug symptoms. That art presupposes a separate study of diseases, and also as complete and separate study of drug effects—materia medica. I complained that our works on materia medica were arranged on anatomical and not on physiological lines. As diseases are as a rule due to disordered functions, in diagnosis we interrogate organs and systems. Diseases usually have also a clearly defined course. These we recognize. Now my idea is that somewhere

we should find drug effects thus outlined. Drug effects are supposed to be uniform and constant, e. g., the contracted pupil and rectum of opium narcosis and the dilated pupil and wide-open sphincters of belladonna. Here we meet an obstacle to the study of drug effects. We are told that there is a dual action, e. g., that opium produces pupil dilatation at first and belladonna the reverse. Do they? If so, are the symptoms arranged in any work in this sequential order? My article has secured attention (thanks, Mr. Editor), and one physician writes:

St. Paul, Minn.

My Dear Dr. Duncan:

Please accept my thanks for your fine paper on page 328 AMERICAN HOMEOPATHIST for Oct. 15, 1898, and to offer a possible answer to your seventh query by referring you to Heinicke's Pathogenic Outlines of Drugs, Boericke & Tafel, 1880. With high regard, I am,

Yours very truly,

R. B. LEACH, M.D.

It would seem from the title that this work should give the outline we want. It does give the outline of the drugs according to systems physiologically in a very satisfactory manner, but makes no attempt at a sequential exhibit of the symptoms as given by the various provers. It takes up the study of the drug in this manner: 1, generalities; 2, nervous system; 3, organs of circulation; 4, respiration; 5, digestion; 6, urinary and sexual organs. Then is given a chapter on its "employment among the sick." In the latter the author makes no attempt to emphasize its similarity to certain phases of certain diseases, but gives a list of the diseased conditions in which the remedy maybe has been given.

These therapeutic hints do not now concern us except to say that how and when to give the remedy is left to the supposed skill of the prescriber. Here it is quite as unsatisfactory as most works on Homeopathic therapeutics. Still this work is not a therapeutics. But this part of the work is outlined, we suppose, to verify its pathogenetic effects upon the healthy body. The outline of the drug action on the organs is very good. Just what effects that are produced are printed in black-faced type, and it will, perhaps, interest the reader to know that these are chiefly pathological.

Good as this work is for the student of drug effects, it falls far short of what we need. It is, however, a good beginning. The symp-

oms of the drug should, it seems to me, be taken in the language of the provers, and advanced in the consecutive order of development. To emphasize what I mean, take belladonna. We are told here that it produces at the beginning "intense (nervous) excitement." How? By rapid action of the heart. Where is that started? Rapid circulation (palpitation) gives rise to headache (frontal) and other cerebral symptoms. Some of the wires that lead from the head centers are affected, and finally relief comes by effusion (urination, perspiration, catarrh, stool, etc.). We need a work that will give us a bird's-eye view of the drug action, and then fill in all the symptoms of the drug in the proper niches, not anatomically, as now, but by organs and systems and in the order of development. That would give us a new work—a rearranged *materia medica*.

Let me emphasize again. In therapeutics we do not need all of the symptoms of belladonna; for example, the LAST symptoms, the getting well, or SECONDARY, are usually THE ONLY ONES we need to select from to match our cases. The therapist does not ask for a large work, but a small one with clear-cut, emphatic symptoms, secondary symptoms to match those of his cases. Where can we find this book? There are other obstacles to the practice of medicine strictly according to similia. If there were not, many and serious ones, the allopathic readers of our works would have seen beauty in our similia long ago.

Correspondence,

EDITOR HOMEOPATHIST: Your medical patient "Anxious Enquirer" case, reported in November 1st issue, gives few symptoms. If the mechanics of the "rectal specialist" and "the operation" have not obliterated the guides for selection of the curative remedy, he can be cured:

Prolapse of rectum:

Hemorrhoids worse standing, walking.

Hemorrhoids worse after stool; better sitting or riding a wheel; better after hot-water enemas.

Mechanical treatment aggravated.

Sulphur in A STRONG POTENCY will help him. But as it has required ten years to make him sick, it may require a year or more to cure him; the knife will not do it.

H. C. ALLEN, M.D.

Chicago, Nov. 8, 1898.

In addition to the above there have been several letters from Drs. Joseph Hasbrouck, of Geddes Ferry, N. Y., and J. Baernster, of Quebec, Ill., recommending the giving of kalmegh. Dr. Baernster prefers the 30th or 60th. Dr. Hasbrouck says that Guernsey's remedy had been studied with delicate operations and results.

Dr. J. C. Whelan, of Port Chester, N. Y., recommends 10 to 20, twice daily. If not entirely cured then give sulphur, high. In case bowels remain closed, give some substitute for oil of sweet almonds.

Dr. A. C. Campbell, of Port Huron, Mich., recommends 20 or higher, and the entire removal. This would prepare the way for some of our London friends, Farrer, or suggest to our countrymen's study of Guernsey's interpretation of Hahnemann's.

Dr. J. C. Manning, of Fort Wayne, Ind., recommends care in mechanical appliances for removal of blood from the rectum, and the use of these appliances to American Empirics—Felix.

Obituary.

We have with deepest sorrow, on the death of the estimable man and distinguished physician and teacher, from a newspaper clipping, or rather from a paper, that Dr. J. Heber Smith died in Boston on Sunday morning, October 31, and of heart disease. Dr. Smith was born in New Spain, Me., Dec. 5, 1842, and was the son of the well-known Methodist clergyman. He was a graduate of Hahnemann of Philadelphia, 1864. He removed to Boston in 1882. In 1873, on the founding of the Boston University School of Medicine, he became one of the original members, taking the chair of professor of materia medica and so continued in office and place until the present time. He was for more than thirty years a member of the American Institute of Homeopathy. He has held many places of honor and trust in the profession having been, among others, President of the Massachusetts Homeopathic Medical Society in 1864. The faculty of the Boston University School of Medicine met on October 25th, and adopted the following resolutions:

"J. Heber Smith, physician, medical teacher, friend, having been called by the dispensation of the Eternal Wisdom from

his earthly labors, his surviving colleagues on the Faculty of the Boston University School of Medicine mourn his death, honor his memory and hereby testify to their deep appreciation of his quarter of a century's unremitting, steadfast and faithful labors in behalf of the School. In class-room, in business meeting, in social gathering, his clear and efficient teaching, his words of counsel and his genial presence will be sadly missed. His strong individuality, his unfailing cheerfulness, constant good-humor and pungent wit, united with his scholarly attainments, made him a convincing personality. His patient and uncomplaining submission to life-long infirmity, his sympathetic and keen appreciation of the sufferings of others, his energy and forgetfulness of self in ministering to the necessities of others will linger as an example to be imitated by all whose good fortune it was to know him. To his family and relatives we extend our sincerest sympathy for a bereavement which is an affliction shared by all who were numbered with his friends."

Dr. Smith was a popular teacher, as he was a friend to all his patients. We had the pleasure of meeting him but once; but that once was enough to endear him to us, and to believe him a giant in his special work. We have kept up a correspondence for many years; so that we are not strangers. His was a grand and noble life. Singularly pure in all his relations with the world and in his home life, he took no violent or vicious part in the ever-increasing politics of the profession. He upheld the honor of the profession in his personal life, in his teaching and practice.

Homeopathy cannot afford to lose many men like J. Heber Smith. The present generation of homeopaths is not growing that kind of medical timber. They are too much wrapped up in the chemical and microscopical researches of the allopathic scientists. A man who to-day stands out fair and free before the profession, and the college classes, and avows himself a believer in Homeopathy—a Homeopathy that casts out Alternation and Combination Tablets—is apt to be pilloried as an old fogey and an unprogressive crank. Men like Dr. Smith do not restrict homeopathic practice to a few unpretentious colds and fevers, such as might be self-limiting, or which

our good grandmothers were able to doctor. They believe there is an absolute and infallible law back of Homeopathy which even the present craze for bugs and worms and other small insects cannot overthrow.

Dr. J. Heber Smith was an honest man and teacher. He was a homeopath and taught it without admixture of current hypocrisies. He lived in the faith and has died in it. Greater glory than this can come to no professional man—that he upheld the banner of his medical faith and went down with it held high above him! When such a man dies the profession loses a strong and powerful influence; but his memory will not perish. He has sown the good seed, and the many, many students and practitioners who have sat at his feet and listened to him will carry on his life-work to the ends of time.



The well-known Brooklyn practitioner, Dr. J. Freeman Atwood, died of typhoid fever Monday, Nov. 21st.

Dr. Atwood had been in practice in Brooklyn for about twenty-five years. He was the son of a Methodist Episcopal clergyman who was known throughout the East and especially in New Jersey, where he preached for half a century or more. On his mother's side Dr. Atwood was a descendant of Archbishop Cranmer, of the Church of England, who was executed as a heretic during the reign of Queen Mary, but who was almost canonized since in the Episcopal Church. Dr. Atwood's medical education was obtained at the College of Physicians and Surgeons and at the Post-Graduate Medical School in Manhattan. He came to Brooklyn soon after the completion of his medical studies and began at once an extensive practice, but found time to identify himself with the social and religious phases of Brooklyn citizenship. Dr. Atwood was married to Miss Viola Dubois, the daughter of Ithmar Dubois, who, until a few years ago, was a well-known Brooklyn merchant, and who survives him. He leaves also two children, Miss Helen and Stanley, a boy of eight.

For several years Dr. Atwood had been on the staff of the Homeopathic Hospital, and was at the time of his death president of the Homeopathic Medical Society, and had also been deeply interested in the work of the Brooklyn Nursery.

It is believed by his physicians that his illness was superinduced by overwork and his

zealous attention to his patients. He was taken ill about two weeks ago. After returning from a late call on the night of Nov. 1st, he took a hot bath. In the midst of it he was called up by telephone to a distant part of Brooklyn, and did not return until nearly morning, when he seemed to be exhausted. On the following day, although very ill, he continued to visit his patients, but on Saturday he was obliged to surrender, and allowed his family to send for one of his brother physicians. At first his ailment appeared to be a low fever, supposed to be malarial, but typhoid symptoms soon developed. With it came nervous collapse, which greatly enervated the doctor, and undoubtedly hastened his death.

Dr. Atwood had innumerable qualities that greatly endeared him to a large clientele and numerous social friends. His ready sympathy and instant appreciation of suffering had earned him admirers by hundreds. Professionally he was in the front rank of medical practitioners, and was a contributor to the AMERICAN HOMEOPATHIST and to several journals of medicine and surgery at various times.



We have just learned from our Chicago correspondent that Dr. J. S. Mitchell died on the morning of November 4th of an aneurism believed to be in the thorax. The Medical Visitor says he was born on the island of Nantucket, about thirty miles off the coast of Massachusetts, in 1839. He was a graduate of Bellevue, 1863, and came at once to Chicago. He was one of the founders of the Chicago Homeopathic Medical College, and was its president for twenty-four years. Our personal acquaintance with him was slight; but in whatever we had to deal with him, we found him of the highest type of honor and integrity. His death is a great surprise, and a sad blow to his college, his family, and his many friends.



Death has been very busy. The east furnishes another sad bit of intelligence. Dr. N. W. Rand, of Monson, Mass., departed this life November 5th, after an illness of ten days. One week before his death he had undergone an operation for appendicitis. He was born in 1853, and graduated from the N. Y. Hom. Med. College in 1878. He was a popular physician and friend. He occupied many places of trust and honor. And while a vigorous prose writer, his memory will be preserved by

his many contributions to "Random Rimes," a book before the profession and the world.

We learned of the death of Professor W. A. Edmonds, of St. Louis, with profound sorrow. He died Sept. 22, 1898, at the residence of his daughter in Woodford County, Ky. Dr. Edmonds was in his 77th year, and occupied prominent places among the homeopathic physicians of the South. He was for many years one of the teachers in the Homeopathic Medical College of Missouri, and his kindness endeared him to the students, leaving an impress upon the memory that never faded away. That the brightest jewels of Eternity may be his is our earnest prayer for our old professor.

[The above is from the Medical Visitor, and we say Amen! to it most heartily. We had the pleasure and honor of sitting under Professor Edmonds' teaching during our college term, and found him amiable and gentle, as well as kind and just to all the class. Poor old man! He had lots of trouble in his old age—mainly through the fault of others. May his rest be sweet. He fully earned it.]

Globules.

The American microscope is equal to, if not better, than the imported article.

The vegetarians of Chicago are saying that the slaughter of cattle, sheep and hogs is the prolongation of the red hand of war, and a barbecue is a most inappropriate form of patriotic jubilee banquet. They further declare that prunes, cauliflower and tomatoes are, from an epicurean point, the real emblems of peace. —Ex.

The Cleveland Homeopathic Medical College had a little fire in its histological laboratory which caused considerable smoke and some damage. Nothing to interfere, however, with the prompt resumption of work and its continuance to a successful finish. Notwithstanding a great deal of newspaper notoriety, the college is going along in its own way undisturbed and serene, with a class of fifty seniors for next March.

Dr. T. C. Duncan has written another of his papers on the better study of our materia medica. He is making a plea for a clearer

beginning of the study of a remedy. In this we all agree with him most heartily; for those of us who have not polished the colleges' benches for at least ten years realize how poorly we were taught in materia medica; and are anxious to see improvement along this line as well as in surgery and gynecology. We bespeak a careful reading of this and subsequent papers from the pen of Dr. Duncan. Why shouldn't there be the same advance made along the lines of materia medica and therapeutics as in gynecology and surgery and nose and throat and eyes—and even in anatomy—as is so evident?

Wonder what Fisher is doing? Who is Fisher? Don't know Fisher? Why, bless you, he is the editor of the Medical Century, published in New York and Chicago. Are we so soon forgot when we go to Europe for a few weeks? It is a fact, however, that the editorial profession is very quiet pending his return. But wait until he comes back and "unloads" his reminiscences! He will have material for a large number of Centurys. If the condition of his patient permits, we may expect newsy interviews with all the prominent old-world homeopaths. Well, it is good to get a little new thought in our journals.

The Medical Mirror, under the editorial guidance of Bro. Love, counsels the use of the "I" instead of "we" for the editor. As we understand the use of the pronoun, it is not used to hide the identity of the writer—for no one is misled by its use, but simply as an act of modesty. An editor who writes in the first person is apt to be marked down as exceedingly egotistical. It is not the editorial personality which should speak to a large subscription list, but the editorial office, or chair, or tripod. Again, if Bro. Love intends to show a doctor's gig, in his illustration at the head of his "By-the-way" page, he must have had an unusually happy experience with his country practice. No country doctor drives through three or more inches of mud in a closed two-horse coupe, with a pipe-clayed driver on the box. Our experience has been that the country doctor rides a two-wheeled cart when the roads are very heavy—a cart that dislocates his several and respective kidneys—or ovaries, as the case may be; and in fairly fair weather he has an open or a closed-top "piano-box."

Becton, Dickinson & Co., of New York, are sending out a little pocket thermometer which is very handy for doctors. It is light, compact and reliable and not costly.

The annual receipt of a P. Blackiston's Son & Co.'s Visiting List is acknowledged. It is the usual excellent little pocket-book with which our many readers are familiar.

It pleases us to say that State Food Commissioner Blackburn, of Ohio, was re-elected to his office, and will continue to wield his official club over the evil-doers in the pharmaceutical profession. Even the gilded lie circulated in perhaps all the daily press two days before the election and private circulation failed of its effect. Now look out for snakes!

A favorite plan with one of the most disreputable class of blackmailers is to select some physician of wealth and high social standing to see a female patient in some disreputable house, and then extort money as the price of release. The game failed recently with a New York physician, who was a trained athlete, and knew how to use his fists. Never forget there can be no safe compromise with a blackmailer.—N. Y. Med. Times.

We sincerely trust that that square-headed homeopath of England—R. E. Dudgeon—will fall afoul of that article in the current New England Medical Gazette entitled, "Would Not Hahnemann Have Done This?" by Dr. Sara Newcomb Merrick, of Boston. It is such a delicious bit of prose composition based on an imaginary postulate—we had almost said straw-man—that we would like to see the Grand Old Man of Homeopathic England give this Boston lady a few homeopathic points.

Refraction: A Question Compend for Students of Medicine. Arranged by R. S. Copeland, A.M., M.D., Ann Arbor, Mich., 1899. This is on its face a valuable addition to the student's necessary books. It is not large in volume, but is large in value. It is a mere pamphlet, but within its pages are crowded the principal information needed by the eye-student. Dr. Copeland's style is charming, and the arrangement of his facts excellent and to the point, being in the form of questions and answers.

Old and new school authorities concur in the statement that not less than five nor more than seven drops of the mother tincture of thuja, twice a day, will give relief in every case of excessive seminal emissions.—Med. Times.

Dr. W. H. Holsberg, of Lebanon, Pa., recommends the use of B. & T.'s dark tincture of hamamelis, applied on absorbent cotton to the protruding (rectal) parts, in answer to request for help. Cocaine, he says, can be applied shortly before. This treatment should be continued for a month or more, or until the protusion subsides.

Saliva as an Anthidrotic.—The *Klinisch-therapeutische Wochenschrift* for August 14th refers to experiments by Kralin, Deguy, and Meurisse showing the excellent effects of tincture of saliva in the sweating of consumptives, rheumatics, and convalescents. From thirty to forty drops are given about two hours before the time for the sweating to come on. The trouble soon ceases, sometimes after the first dose.

Headaches, if due to pelvic disturbances in the female, are usually located at the top of the head and are accompanied by soreness of the scalp; if due to digestive disturbances, they are occipital or frontal; if to disease of the pharynx, they involve the entire vault, as though the pharynx were expanded and extended upward; if due to migraine, they are usually one-sided, local and accompanied by soreness at the supraorbital foramen; if to eye strain, generally superciliary or frontal, sometimes occipital; if to disease of the nares, between the eyes and extending backward.—Dercum.

There was sad disappointment in store for the assemblage of the Southern Homeopathic Medical Association, at Birmingham, in that, notwithstanding the excellent programme arranged, and the frequent calls to the faithful, but a bare corporal's guard appeared. This is wrong. As one of the correspondents says: The Southern homeopaths are lukewarm, nay, indifferent. The few who are located here and there are wealthy and careless. This should not be. But such members as attended were well paid by the heartiness of the entertainment, the value of the papers presented, and the ensuing discussions. Asheville next.

An article in our November 1st issue, pg. 44, having reference to the fifty-first semi-annual meeting of the Homeopathic Medical Society for Eastern Ohio, held at Canton, should have been credited to the Cleveland Plain-Dealer.

An advertisement of a so-called medical college was offered to the Medical Examiner. It came so easy that we wrote to the Board of Health of the city where it was located. We found that the price for a license to do business was \$2.50 for medical diploma mills.

A homeopathic medical magazine speaking of independence in journalism says, with truth: "A medical journal that is tied to a college or pharmacy or any other institution holding the editor by the throat, is usually not worth reading. Its opinions are obviously valueless. Its editorial ideas are but empty echoes. If he has any convictions they must be bottled up. His self-respect must be subordinate to his master's self-esteem." And a lot more like it, all of which is too true.

If Fisher had been at home we doubt whether the letter from "Medicus" would have appeared in the current Century. To quarrel with the Palmar Arch because it has its own way of keeping its members loyal is puerile. We would be willing to wage a small sum of money that the article was composed and sent in only to rap Dr. Biggar over the knuckles. He was one of the speakers at the P. A. banquet. It may be necessary to have one society where the professors do not run the whole business. If there be any secrecy about the initiation, or any oath, we know nothing of it. We are not a member, but were asked to join last spring, and declined only because of too many other engagements for each evening. It is a noteworthy fact that it is one of the largest organizations in the city, and is not torn by jealousies and rings.

We will print very soon a splendid paper on "Shakespeare in Medicine," by our accomplished brother of Indianapolis, Dr. Wm. B. Charles. We have also other first-class articles in the "hopper" which we believe will please and instruct our readers. It is a very gratifying reflection in these very hard times that the AMERICAN HOMEOPATHIST has continued to hold its own both in subscription and influence.

Therapeutic Use of Castor Oil Externally.
—According to the Massachusetts Medical Journal for October, Dr. Beloll advises that castor oil be heated and thoroughly applied to the abdomen of the child suffering from constipation. He says this will often move the bowels as effectually as when the oil is given by the mouth.

In infants, according to Eustace Smith, pain in the head is indicated by wrinkling of the nostrils; abdominal pain, by a drawing of the brow; pain in the chest, by sharpness of the upper lip.—Med. Age.

"Take as Directed."—The doctor said to the patient's wife: "The medicine I shall send must be taken in the recumbent posture." After he had gone, greatly puzzled, she kept repeating, "A recumbent posture—I haven't got one." Finally, she applied to a benevolent neighbor: "Have you a recumbent posture to lend me to put some medicine in for my old man?" The neighbor, as ignorant as the applicant, replied: "I had one, but, to tell you the truth, I have lost it."—Practitioner.

Fresh young doctors who identify themselves with church congregations for the purpose of having an eye to business, as well as goodness, will be encouraged by the Arkansaw Thomas Cat, which says: "A doctor recently came to town, and, as there was no physician in a certain Hot Springs church, he put his letter in there. The parson, receiving him into the church, said: 'Dr. Skinner is not only a Christian, but a good doctor. He makes a specialty of all kinds of chronic diseases, and treats the eye, ear, throat and nose with much success. His office hours will be from 9 a. m. to 6 p. m., and will make calls day or night. He also extracts teeth. Telephone 409.'"

Cora Smith Eaton, M.D., with medical and surgical diseases of women a specialty, has very pleasant offices in the Masonic Temple, Minneapolis, Minn.

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FRANK KRAFT, M.D., EDITOR, CLEVELAND, OHIO.



WM. B. CLARKE, M.D.

SHAKESPEARE IN MEDICINE.

WM. B. CLARKE, M.D.,
Indianapolis, Ind.

Read before the Indianapolis Homeopathic Medical
Society, December, 1898.

Shakespeare thoroughly knew nature, God's great alchemist and chemist, in all her many and intricate manifestations—indeed, "no man ever laid his head so close upon the great heart of Nature, and heard so clearly the mighty throb of her deep pulses"—and it was largely because of this intimate knowledge and true depiction, whether in passion, romance, philosophy or history, seemingly done with consummate and marvelous ease, dominated, of

course, by the wonderful genius of his brain, as giving his rich and musical style delicate tracery, beautiful imagery, unequalled sagacity, and massive intellectual creative power, that in his writings he could cover every field of human endeavor and thought and strike a responsive chord in every human heart as no other writer has ever done, and which has made this permanent influence of this myriad-minded man over mankind so infinitely greater than that of any other man who has yet lived. It is a trite saying that the thoughts and expressions of Shakespeare permeate all English writing since his time, and scintillate in all the effusions of the lawyer, doctor and divine, and illuminate the pages of the wit, poet, fictionist and general literature the world over. Indeed, it seems that there is not an emergency, incident or occasion possible in human life but what might be mottoed with a quotation from Shakespeare, while his images, metaphors, comparisons, similes and all other figures of speech are so varied and numerous as to render him liable, more than any other writer, to be quoted, copied and imitated. Emerson best and most briefly expressed this thought when he wrote, "Literature, philosophy and thought are Shakespearized." Shakespeare had almost no model to work by, and is yet unapproachable by any author, even with his own great work and the extraneous aid furnished by 300 years of subsequent writing as examples, though many have tried to imitate his style by producing similar plays, the most pretentious being Tennyson's "Queen Mary" and Addison's "Cato." How well they have failed or succeeded I leave for you to judge.

It is true that of late years a spirited discussion has arisen as to the real authorship of the writings generally attributed to Shakespeare. On only one point are these opposing advocates agreed, and that is the surpassing merit

and a general medical discussion. As for my brother-in-law, I am so loyal in the belief that Shakespeare wrote Shakespeare that it would give comforters as strong as proofs of holy writ to establish even a doubt of it in my mind. I do not wish to go so far as to think that this question is closed, until after the death of the good Dr. Ross and Dr. his contemporaries—Lincoln, Spencer, Chaffee, Almon, Green and others including Ward, the Year of Straggle—many of his medical works, the former, may, in future, suggest that he was not of an age, but for all time.

A critical volume could be built up of quotations confined to either medicine or law. For with rare professional acumen, he found, as he puts in the mouth of the Duke, in "As You Like It," act 2, scene 1, "tongues in trees, books in running brooks, sermons in stones, and in the ringing brooks, sermons in stones, and good in every thing." While at first sight this may not seem to be a quotation having medical application, read between the lines it is essentially so, as a hint to study the earth and nature and by no means get our education entirely from our books. It will be our pleasant duty this evening to review and enjoy a few of the notable gems that sparkle amid such a profusion of others which show his wondrous familiarity with that subject nearest to our hearts and which we have made our life-study—medicine.

To first quote, he tells us to study our profession, and that even in its very selection it must be a congenial one, thus, spoken by Tranio, in "Taming of the Shrew," 1, 1:

No profit grows where is no pleasure taken;
In brief, sir, study what you most affect.

Thus we become worthy the station drawn by Linnaeus:

Give play to the sick, ease to the pained,
The poor, lame, blind, halt, creep, cry out for thee.

If all the members of our noble profession can feel the thrill of the high pride and exultation in the acquirement and possession of knowledge pertaining to it voiced by Cerimon, in "Pericles, Prince of Tyre," 3, 2, then is its future safe:

Well known I ever
Held thee to be, through which thy secret art,
By thee, and our authorities, I have
Clothed thee with my practiced-made familiar
To me, and to my aid the bless'd infusions
Thou wast to be alive, metals, stones,
And I am none of the disturbances
Thou hast to work, and of her cures which
doubt have none.

A noble conflict in college of true delight
Thou dost to thine, after tottering honor
Or the more measure up in silken bags
To please the fool and the death.

Shakespeare's verified writings are comprised in thirty seven plays and five miscellaneous poems, and a search through these for quotations bearing on the practice of medicine reveals his great familiarity with the Esculapian art of his day, and in notable instances he is far in advance of it, as I hope to be able to show. As he was born in 1564 and died in 1616, he may have written at least one of these notable quotations 300 years ago this very day. (And this year is also the 300th anniversary of the issuance of the edict of Nantes by Henry IV., which secured to Protestants in France the right to meet for worship and to exercise religious privileges.) As his elder and favorite daughter, Susanna, married a physician, Dr. John Hall, he may have taken much interest in medicine because of this. Certain it is, he clearly wove in threads representing anatomy, physiology, chemistry, organology, etiology, dermatology, psychology, neurology, pharmacology, obstetrics and surgery. Of these he took special interest in obstetrics, though but little in surgery, the latter because the surgery of the day did not amount to much, because of the ignorance of anesthetics—though all must admit that in many of his plays he was a great shedder of blood.

His depiction of insanity was eminently true to nature. Few are fitted by study and observation of the paranoiac, or partially insane person, to detect slight mental aberrations and point out delicate variations from normality in the unfortunates of the living and enlightened present, but what shall be said of the psychiatric ability that can perform such distinguished service for characters in plays written 300 years ago? Shakespeare makes insane people talk, walk and act as insane people do, and presents them varying in degree from slight mental obliquity from drink or disease to the raving maniac—and this is something that the dramatists since his time have hardly dared to even attempt. Psychology, in the broadest acceptation of the term, means the science of the intellectual and moral faculties, but of late years the term has been freely used to denote or include aberrant phenomena in connection with mental conditions. Dr. Bucknill, of England, forty years ago wrote: "Shakespeare not only possesses more psychological insight than all other poets, but more than all other writers." There was in all England in Shakespeare's time but one small, poorly-ordered insane charity. This was the

original Bedlam, Bethlehem Hospital, in Bishopgate street, London, with a capacity of 50 patients, established in 1537 (Encyc. Brit.). We have to conclude, then, because of his limited chance to study this subject, that Shakespeare gained most of his knowledge in this field, as in many others, by intuition rather than by study.

While he made what we may call mistakes, the exigencies of the play or the subtlety of a character, often required the result arrived at or the action laid down. Of such, for instance, was the death of Desdemona. Probably he knew as well as we that a person is not smothered who revives enough to speak, as she does to declare her own and Othello's innocence. He makes characters speak of clocks (in "Julius Caesar"), cannon (in "Macbeth"), spectacles (in *King Lear*), etc., before these articles were known, drove the ship in "Winter's Tale," on the coast of Bohemia, though Bohemia has no coast, and put lions in the English Forest of Arden. He sent Hamlet to the University of Wittenberg at a time the university did not exist, and perpetrated many anachronisms, such as putting words of Aristotle in the mouth of Hector, in "Troilus and Cressida," though he lived 800 years before the former, and had Menenius, in "Coriolanus," speak of Galen, though he lived 600 years before Galen was born. But he made his characters talk right. Shakespeare never let a rebellion succeed. But he lived in the Elizabethan, royal, age, and was politic. He could not do differently then, but would probably do differently now. But we have neither time nor desire to pick or magnify flaws. He felt privileged in such matters, as we see by what Gower says in "Pericles," 4, 4:

We commit no crime
To use one language in each several clime
Where our scenes seem to live.

And he probably had in mind Aristotle's dictum: "Nothing is called a fault in poetry but what is against the art; therefore a man may be an admirable poet without being an exact chronologist."

I said he had depicted all phases of human life, and so he did, all but two. He had no children in his plays, that is, little more than a suggestion of them. Though he rose superior to them, I can but believe he made a mistake, for a man, whatever his mental powers, can take delight in the society of a child, when a person of intellect far more matured, but inferior to his own, would be simply insufferable.

But how beautifully he describes the death of the doughty warrior, Falstaff, and sent him back to childhood, when "a babbled of green fields." And out of the mouth of Constance he thus depicts the power of children and the strength of our love for them:

Grief fills the room up of my absent child,
Lies in his bed, walks up and down with me;
Puts on his pretty looks, repeats his words,
Remembers me of all his trifling errors,
Stuffs out his vacant garments with his form.
O, Lord! my boy, my Arthur, my fair son!
My life, my joy, my food, my all the world!
Constance, in *King John*, 3, 1.

Yet if we analyze the action of this character we find the passionate utterances of this mother to be due more to wounded pride, disappointed ambition and indignation for her supplanted prince than to motherly love. Indeed, there is not, strange to say, a real mother in Shakespeare. There are queens and wives, but no ideal mother. "Though he has sounded with the plummet of his genius all the depths of woman's love as wife, daughter, sister, servant and friend, he left unexplored that mighty power of motherhood, which is one of the great elemental forces of the world."—Mary B. Whiting.

Reference to the physician is frequently made by Shakespeare, though comparatively few of the quotations we shall use are spoken by medical men. He presents several doctors in character, notably the astute and careful Cornelius, in "Cymbeline," who by substitution thwarts the Queen's request for poisons, which he says "She'll prove on cats and dogs, then afterward up higher." The Doctor in "Macbeth" is wise and conservative in his handling of the difficult case of the somnambulist and conscience-stricken murderess Lady Macbeth, and the Doctor in "King Lear" shows excellent skill in his treatment of the unfortunate, buffeted and weather-beaten old King Lear. We have Dr. Butts, in "Henry VIII," who acted a contemptible part toward Cranmer, whom he disliked, and Dr. Caius, who talks French in "The Merry Wives of Windsor," who Sir Hugh avowed had "no more knowledge of Hippocrates and Galen, and he is a knave besides," but to whom the Host (act 2, scene 3) once says, "Bless thee, bully doctor," and Shallow, at the same place, says: "You have showed yourself a wise physician." Dr. Shaw, in "Richard III," is a political intriguer only, and Dr. Peace, in "Henry VIII," was ousted from a good place by Cardinal Wolsey. Helena, in "All's Well that Ends Well," might be mentioned for her

And this act cost the lives of Paris, Romeo and Juliet:

Pursue him to his house and pluck him thence,
Lest his infection, being of catching nature,
spread further. Brutus, in *Coriolanus*, 3, 1.

And as to more reason for this action, through the contagiousness of disease, we read:

Sickness is catching.
Helena, in *Midsummer Night's Dream*, 1, 1.
Men take diseases one of another;
Therefore, let men take heed of their company.
Falstaff, in *Henry IV*, 2d, 5, 1.

Perhaps some of you who have had a good deal of unremunerative professional and other work callously piled upon you may feel in your declining years like rebelling and saying, with the Senator, in "Timon of Athens," 2, 1:

I must not break my back to heal his finger.

In our discussion of the subject of cancer, last winter, when I said that cancer was a quite modern disease, possibly induced by vaccination, a member spoke of Shakespeare's allusion to the disease, using the word canker. This is purely an error of interpretation, since Shakespeare's allusion to canker related to the floral kingdom, as, for instance, when Titania gives her orders to her train of fairies:

Some to kill cankers in the musk-rose buds.
Titania, in *Midsummer Night's Dream*, 2, 3.
In the sweetest bud the eating canker dwells.
Proteus, in *Two Gentlemen of Verona*, 1, 1.
I had rather be a canker in a hedge than a rose
in his grace.
Don John, in *Much Ado About Nothing*, 1, 3.
Now will canker sorrow eat my bud.
Constance, in *King John*, 3, 4.
The most forward bud is eaten by the canker
ere it blow.
Valentine, in *Two Gentlemen of Verona*, 1, 1.

The kind of a thing that makes business good for the genial gy-ne-col-o-gist, or guinea-cologist, as they say in England, indeed makes business possible for him, is thus portrayed:

A woman that is like a German clock,
Still a repairing; ever out of frame,
And never going aright; being a watch,
But being watched that it may still go right!
Biron, in *Love's Labor's Lost*, 3, 1.

While disclaiming the least desire to detract one iota from the splendid fame of Dr. William Harvey in his great discovery of the circulation of the blood, worked out logically and persistently, I must confess that to me there is a great fascination in tracing in Shakespeare's writings how nearly their author is entitled to at least "honorable mention" along this same line of research, for he antedated Harvey. Harvey became a doctor in 1602, and 14 years after (the very year of Shakespeare's death, the latter having then ceased writing for four years, his collected works being first published

in 1623,) first announced some views on the movement of the heart and blood, enunciating them for several years thereafter in college lectures, and finally, in 1628, publishing his famous treatise, "Exercitatus de Motu Cordis et Sanguinis." It is not necessary to here review the crude conceptions which at or before this time obtained regarding the circulation of the blood, and I will only ask you how could Shakespeare have written the following if he had not had a correct or nearly correct idea of the circulation of the blood:

There was a time when all the body's members
Rebelled against the belly.
Your most grave belly was deliberate,
Not rash like his accusers, and thus answered.
True is it, my incorporate friend, quoth he,
That I receive the general food at first
Which do you live upon; and fit it is;
Because I am the store-house and the shop
Of the whole body; but if you do remember,
I send it through the rivers of your blood,
Even to the court the heart to the seat o' the
brain;
And, through the cranks and offices of man,
The strongest nerves, and small inferior veins,
From me receive that natural competency
Whereby they live.

Menenius, in *Coriolanus*, 1, 1

See how the blood is settled in his face.
Oft have I seen a timely-parted ghost
Of ashy semblance, meagre, pale, and bloodless
Being all descended to the laboring heart,
Who in the conflict that it holds with death
Attracts the same for aidance 'gainst the enemy,
Which with the heart there cools and ne're
returneth
To blush and beautify the cheek again.
But see his face is black and full of blood.
Warwick, in *Henry VI*, 2d, 3, 2.

(The rest of this quotation is classed by Bell in his *Principles of Surgery*, London, 1815, as the finest extant description of a death from apoplexy, though pictured as the violent death of Humphrey.)

The tide of blood in me
Hath proudly flowed in vanity, till now;
Now doth it turn and ebb back to the sea.
Where is shall mingle with the state of floods,
And flow henceforth in formal majesty.
King Henry V, in *Henry IV*, 2d, 5, 2.

Why does my blood thus muster to my heart,
Making both it unable for itself,
And dispossessing all my other parts of neces-
sary fitness?
So play the foolish throngs with one that
swoons;
Come all to help him, and so stop the air
By which he should revive.
Angelo, in *Measure for Measure*, 2, 1.
You are my true and honorable wife,
As dear to me as are the ruddy drops
That visit my sad heart.
Brutus, in *Julius Caesar*, 2, 1.

Though there are many other strong passages relative here, lack of time will prevent their presentation. But another singular coincidence concerning Harvey and Shakespeare should be mentioned. In Timb's *Mysteries of Life, Death and Futurity* are mentioned several instances of death from broken heart, and the statement that Dr. Harvey was the first

When our most learned doctors leave us and
The congregated college have concluded
That laboring art can never ransom nature
From her inaidable estate.

King, in *All's Well That Ends Well*, 2, 1.

The toxic agents of Shakespeare's fertile imagination were of a potent quality. What expert materia medicist of to-day can duplicate Friar Laurence's feat in aid of Juliet—counterfeiting death for "two and forty hours"—or the "juice of cursed hebenon" poured in Hamlet's father's ears? We could dispatch Romeo with anhydrous hydrocyanic acid as quickly as the poverty-stricken Apothecary's "soon-speeding gear" did, and perhaps our curare would have rung down the final curtain in "Hamlet" as well as the poison had in mind by Shakespeare. The good and cautious Doctor Cornelius, "*Cymbeline*," 1, 3, supplied the homicidal Queen with a supposed poison by her command and then soliloquizes: "'Twill stupefy and dull the senses awhile; * * * but there is no danger in what show of death it makes, more than the locking up of the spirits a time"—a surprisingly close picture of the action of our modern chloroform.

That over-doughty warrior Falstaff gives us the etiology of apoplexy thus:

This apoplexy * * * hath its original from much grief, from study and perturbation of the brain; I have seen the cause of its effects in Galen.

Falstaff, in *Henry IV*, 2d, 1, 2.

And because of the merry and fat old rascal Jack Falstaff, one of Shakespeare's greatest characters, and who speaks more lines than any other, we know that some kind of urine analysis was in vogue in his time. He asks, and is answered by Page:

What says the doctor to my water?

He said, sir, the water itself was good, healthy water; but, for the party that owed it, he might have more diseases than he knew for.

Henry IV 2d, 1, 2.

He it was who said that honor hath no skill in surgery, and cannot set a leg or an arm. And of his end Sir Walter Scott wrote: "the death-bed scene of poor old Jack Falstaff is the most pathetic and pitiful death-scene ever written," as described by Mrs. Quickley, in "*Henry V*," 2, 2.

Of suicide by weapons many examples are given, such as the terrific throat-cutting of Othello and the startling hari kari of Cassius and Brutus, and the daggers of Juliet, Lucrece and Goneril, the latter after having poisoned her sister. Hamlet hints at it in the very first act, scene 2, where he says:

O, that this too, too-solid flesh would melt,
Thaw and dissolve itself into a dew!
Or that the Everlasting had not fixed
His canon 'gainst self-slaughter!

And again in the great "To be or not to be" soliloquy in the first scene of the third act, "When he himself might his quietus make with a bare bodkin." The mistaken and too-previous Romeo uses poison, however, paying 40 ducats for a dram. But Egypt's voluptuous queen, Cleopatra, was the only one to make a study of the matter, Cæsar saying, "For her physician tells me she hath pursued conclusions infinite of easy ways to die." She says, "I have immortal longings in me!" and applies two small serpents to her flesh. She was evidently posted on narcotics also, as she says, act 1, scene 5, "Give me to drink mandragora, that I might sleep this great gap of time my Antony is away." And that honest villain was also posted in them when he shows how the newly-awakened jealousy will affect Othello:

Not poppy nor mandragora,
Nor all the drowsy syrups of the world,
Shall ever medicine thee to that sweet sleep
Which thou ow'dst yesterday.

Iago, in *Othello*, 3, 3.

The patent medicine advertisement writers of to-day must have taken their cue from Shakespeare, who first "promoted" this industry, which has now assumed such gigantic proportions and soars so altitudinously in the empyrean realms of imagination, and whose labors finally furnish the more plodding members of our profession with so many good but tough propositions yecept patients. The King, in "*All's Well That Ends Well*," has a fistula, and the old lord Lafew says to him, 1, 2:

I have seen a medicine
That's able to breathe life into a stone,
Quicken a rock, and make you dance canary,
With spritely fire and motion; whose simple
touch
Is powerful to arise King Pepin, nay,
To give great Charlemain a pen in his hand,
And write to her a love-line.

He then introduces Helena, who speaks of a prescription highly prized by her father, a skilled physician, now dead, urging him to use it:

Ere four and twenty times the pilot's glass
Hath told the trevish minutes how they pass,
What is infirm in your sound parts shall fly,
Health shall line free, and sickness freely die.

The time-honored but insane and now-obsolete practice of free bleeding as the treatment for all diseases is thus hinted at:

Let's purge this choler without letting blood;
This we prescribe, though no physician.

Our doctors say there is no time to bleed.

King Richard, in *Richard II*, 1, 1.

theory of sex production at will, or some other equally good, was in his mind when he makes Macbeth say to his ambitious spouse, 1, 7:

Bring forth men-children only!
For thy undaunted mettle should compose
Nothing but males,

And then he makes Antonio, in "The Merchant of Venice," 1, 3, when speaking of Jacob and Laban's Bible-story sheep, upset all theories:

A thing not in his power to bring to pass,
But sway'd and fashion'd by the hand of
Heaven.

Deformities, etc., are thus mentioned:

Sent before my time into this breathing world,
scarce half made up.

Richard, in Richard III, 1, 1.

Worse than a * * * birth Louis blot;
For marks descried in men's nativity
Are nature's faults, not their own infamy.
Lucrece.

Wise observations follow:

I am sure care's an enemy to life.
Sir Toby Belch, in Twelfth Night 1, 3.

A merry heart goes all the day;
Your sad tires in a mile-a.
Autolycus, in Winter's Tale, 4, 2.

The miserable have no other medicine but only
hope.
Claudio, in Measure for Measure 3, 1.

Moderate lamentation is the right of the dead,
excessive grief the enemy to the living.
Lafin, in All's Well That Ends Well, 1, 1.

But we must hurry on, as our time limit is reached, though we have but dipped into the ocean of quotations available. A few more will be appended without comment:

Now good digestion wait on appetite, and health
on both.
Macbeth, in Macbeth, 3, 4.

Unquiet meals makes ill digestions.
Abbers, in Comedy of Errors, 5, 1.

They are as sick that surfeit with too much, as
they are that starve with nothing.
Nerissa, in Merchant of Venice, 1, 2.

'Tis dangerous to take a cold.
Hotspur in Henry IV, 1st, 2, 8.

When I was sick you gave me bitter pills.
Proteus, in Two Gentlemen of Verona, 2, 4.

I have tremor cordi on me; my heart shakes.
Leontes, in Winter's Tale, 1, 2.

To see the slave doth make the wound ache
more.
Lucrece.

Jago-What, are you hurt, lieutenant?
Ay, past all surgery.
Othello, 2, 3.

The pleasing punishment that women bear.
Aegeon, in Comedy of Errors, 1, 1.

Memory, the warder of the brain.
Lady Macbeth, in Macbeth, 1, 7.

And this for banquet-goers:

These are begot in the ventricle of memory,
nourished in the womb of pliant matter, and
delivered upon the mellowing of occasion.
Holofernes, in Love's Labor's Lost, 1, 2.

And now of death, for, as the Queen, in "Hamlet," 1, 2, says,

All that we must die
Passing through nature to eternity.
It is too late; the life-blood of his bound
corruptly; and his pure brain doth
idle comments that it makes fortell the ending
of mortality.

Prince Henry, in King John 5, 6.

They say the tongues of dying men
Enforce attention, like deep harmony.
When words are scarce they are seldom spent
in vain
For they breathe truth, that breathe their words
in pain

Gaunt, in Richard II, 2, 1.

And then that beautiful painting, which all admire, and which may be called the foundation of all the agnostics' creed, if they may properly be said to have any creed, spoken by Prospero, in "The Tempest," 4, 1:

Our revels now are ended. These our actors,
As I foretold you, were all spirits, and
Are melted into air, into thin air;
And, like the baseless fabric of this vision,
The cloud-capp'd towers, the gorgeous palaces,
The solemn temples, the great globe itself,
Yea all which it inherit, shall dissolve,
And like this insubstantial pageant faded,
leave not a rock behind. We are such stuff
As dreams are made on; and our little life
Is rounded with a sleep.

And now we come to Jaques, the philosophic Jaques, who says:

And so, from hour to hour, we ripe and ripe,
And then, from hour to hour, we rot and rot,

leading up to his famous and oft-quoted Seven Ages of Man, "As You Like It," act 1, scene 7, beginning:

All the world's a stage,
And all the men and women only players

and ending:

Last scene of all,
That ends this strange eventful history,
Is second childishness, a mere oblivion;
Sans teeth, sans eyes, sans taste, sans every-
thing.

But fail not to observe that this is the utterance of a cynic and hypochondriac. To me there is no more beautiful picture, with its frame of pure silver, than the benignant countenance of the aged man or woman who has learned the great lesson of life, to grow old gracefully, and who can say, with Dr. Holmes, I'd rather be seventy years young than forty years old. Let this, then, be our lesson and our ambition, and if we succeed we and the world will be the happier for our having done our part. And

Solve that when the summons comes to go in
The innumerable caravan which moves
To that mysterious room where each shall take
His chamber in the silent halls of death.
There o not, like the quarry-slaying touch-
Scour'd to thy dungeon but, sustained and
soothed

By an unflinching trust, approach thy grave
Like one that wraps the drapery of his couch
About him, and lies down to pleasant dreams.
Bryant's Thanatopsis.

Materia Medica Miscellany.

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The names in this department are made by name, as follows: *Compend*, 2; *Contra*, 3; *Hart. Adv.*, 4; *Hann. Med.*, 5; *Lancet*, 6; *Lancet*, 7; *H. m. Ph.*, 8; *Hom. R. e. c.*, 9; *H. m. S. n.*, 10; *Can. R. e. p.*, 11; *Four. of Hom.*, 12; *Editor*, 13; *Century*, 14; *Counselor*, 15; *Era*, 16; *Voice*, 17; *N. E. Med. Gaz.*, 18; *Times*, 19; *N. A. J. of Hom.*, 20; *Pach. Counselor*, 22; *Hom. News*, 23; *J. ur. of O. and L.*, 24; *Argus*, 25; *Revue Hom.*, 26; *Arch. fur Hom.*, 27; *Al. s. Hom. Zeit.*, 28; *Zeitschrift fur Hom.*, 29; *L. Pr. s. Hom.*, 30; *L'Art Met.*, 31; *L'Hom.*, 32; *Hom. Med.*, 33; *Hom. World*, 34; *Hom. Review*, 35; *Jour. Br. Hom. Soc.*, 36; *Foreign Journal of Hom.*, 37; *Am. Jour. no Hom.*, 38; *Indian Hom. Review*, 39; *Materia Medica Jour.*, 40; *Minn. Hom. Magazine*, 41.

Melilotus in Nervous Headache.

Dr. H. V. Halbert⁴ reports the following case: Miss B—, a lady, thirty years of age, occupation a position of considerable responsibility in a downtown business office. Her general health was perfect, and she possessed unusual physical strength. Her exacting duties, however, began to tell upon her nervous resistance, and she complained of frequent frontal headaches; they generally occurred every Sunday as she attempted to recuperate from the hard work of the week. As nausea and vomiting were attendant symptoms and, inasmuch as the headache was usually located over the eyes, I expected results from such remedies as *iris*, *nux vomica* and *pulsatilla*; these, however, gave no relief. I tried to help her digestion with pepsin, nitro-muriatic acid, arsenicum, etc., but without result. She herself had tried many simple measures of this character and had been very abstemious in regard to her diet, only to become worse from day to day.

After another thorough examination the fact revealed itself to me that my case was one of nervous derangement and not of stomach disorder. Then it was that I easily found many of the cardinal symptoms of *neurasthenia*. I found that nose-bleed was a frequent symptom and always gave her relief; she was also better during menstruation, which was profuse; there was always a violent facial and cerebral congestion with throbbing carotids reminding very much the belladonna characteristics; the remedy gave no relief in any of these. Vertigo was a frequent symptom and vomiting often occurred when the headache was severe.

She felt worse from the slightest movement,

but was always better in the open air. Mentally she manifested a similar exhaustion; her disposition, naturally an amiable one, became irascible and discontented; her memory failed her and she feared she could not hold her position.

After failing with several remedies I was greatly pleased with the result of *melilotus*. The third decimal potency was used, six times daily, for two weeks, without relief; but I was so sure of my remedy that I continued it with confidence; soon I was rewarded with a pronounced improvement. She has now taken it, intermittently, for four months and her recovery is perfect; she attends to her business with perfect freedom from nervous irritation and the headaches have not recurred. I have faith to believe that in such instances as this we shall always get good results from this remedy.

Medorrhinum in Blepharitis.

Dr. Martin Deschere treated a young woman, age twenty-three, who had chronic blepharitis since her eleventh year. He says in the *Medical Advance*: "She had been under homeopathic treatment all this time without any result. Her father is a very strict homeopath, and she had been to various high potency homeopaths. Her suffering was very intense all the time; she could hardly go into society on account of the effect of light upon the eyes, especially gas light. She could not read in the evening, and in the morning the lids would be closed, and she would suffer very much in getting them separated. There was a great deal of discharge, and in that strait she came to me about ten months ago. Now, knowing that most probably every remedy had been exhausted on this patient, I thought I would take advantage of the failure of my predecessors, and knowing that I had treated her father before he was married, for gonorrhea, I thought there might be some latent effect in this patient, and gave her *medorrhinum* on the experience I had with her father. I gave her one dose and followed it up with *sac. lac.* until I found that the effect had ceased, then I repeated the dose until found that her trouble was entirely cured. I used the fluxion potency according to Fincke's plan; I am sorry to say I didn't mark any number; I simply marked it fluxion potency; I suppose it must have been what Fincke would call the fifty-thousandth, but it certainly was an effective potency and did the work.

Xanthoxylum IN DYSMENORRHEA.—Dr. Barrow.⁷—Miss R., aged twenty-seven, had suffered for years from dysmenorrhea. Her sufferings at the menstrual period were so great that life became almost unbearable. She had tried all kinds of treatment without obtaining the slightest benefits. She had been an in-patient at the Royal Infirmary, where she was told she had a "conical cervix," and, under chloroform, an operation was performed. This did not result in any relief to her sufferings, the catamenia being accompanied, as usual, with violent pains. Two years after the operation Miss R., worn to a skeleton with suffering and despairing of getting relief, came under the notice of the writer. He prescribed xanthoxylum ix , ter die , a fortnight before the menstrual period. In due time the menses appeared, and, to the great joy of the patient, there was very little pain. The remedy was continued for some time, and when left off the patient was completely cured.

Arecoline, A TÆNIACIDE.³⁸—M. Ricapet has been studying this alkaloid of the areca nut. On the heart it causes increase of the amplitude without diminution of the frequency of the cardiac pulsations. Toxic doses arrest the heart in diastole. It has great action upon the contractility of the intestine, but is so vigorous that even as a tæniafuge it must be employed cautiously, and the initial dose of 0.015 of a grain must not be exceeded unless it is necessary and the drug is well borne. It surpasses pilocarpine in producing salivation, and eserine as a laxative. It is preferable to pelletierine in its action on the tænia, for it costs less, the active dose is not toxic, it does not cause colic, and no following purgative is required. In such a case it should be given by the mouth in pills coated with keratin or gelatin, in doses of 0.007 of a grain, repeated according to the age and tolerance of the patient, until the result is obtained.

Thuja, AN IDEAL HEMOSTATIC.³⁹—A few months ago a man of fifty years of age came into our office for extraction of lower molar. After removal, the bleeding was quite free and persistent. Upon inquiry we found that he was a "bleeder," and that he had nearly bled to death from tooth extraction once before. After trying everything we could think of with-

out success, while casting about for a last resort, our eye fell upon a bottle of Lloyd's thuja. We made a small plug of cotton, wet it in thuja, full strength, and put it into the bleeding socket; hemorrhage stopped in a short time, and did not return. We have used it in two cases since, with the same result. In three cases of severe nasal hemorrhage that have resisted all other means, satisfactory and prompt results followed the use of thuja. Also in several cases of incised wounds, where bleeding was severe and persistent, thuja controlled the hemorrhage very promptly.—E. P. Whitford, M. D.

Nux Vomica IN HIGH POTENCY.—Dr. S. R. Stone treated a child of six years, weight twenty-eight pounds. Has been under allopathic treatment. Appetite capricious, sleep restless, very apt to waken about 4 A. M. For the past few months has had occasional convulsions, in which I have never been fortunate enough to see him, but am certain there was some opisthotonos present. Patient also suffered from dyspepsia and constipation. Was called at 11 P. M., October 15, during a convulsion, from which he recovered before I arrived. No symptoms present on which to prescribe, but the history suggested nux, and I gave a powder of the 115 m. He slept better than he had for two years; felt well in the morning. Two more powders were given. He continued to sleep well and eat as he never had. A slight recurrence of the old trouble took place recently, but a repetition of the former prescription relieved at once; shall repeat it every eight or ten days for some time.

Hydrocotyle Asiatica FOR UTERINE AFFECTIONS.—By Dr. E. Nyssens.¹²—Dr. Audouit has observed excellent results in cases of ulceration of cervix, being completely cured in a very short time. These are the symptoms which indicate the remedy, according to pathological and clinical observations: "Dull, aching pain in the region of ovaries. Pressing down in the uterus. Heat deep in the vagina, redness of the vulva and of the vagina, pricking and itching at the vulva. Irritation of the urethra. Redness of the cervix, disappearing on discontinuing the medicine, returning on administering it again. Much increase of the leucorrhœa. Violent pains in and around uterus like labor pains,

after administering 4 drops of the 3 dil. to a woman twenty-five years old. Pain in the uterus, also left side. Menstruation appears four, ten, and even fourteen days too soon (observed upon women both well and sick)."

Hydrocotyle Asiatica has shown, by the same author, a curative action in the following cases: *Pruritus vaginitis*, *elephantiasis Græcorum*, *lupus excedens nasi*, *eczema impetiginosum*, *benign pemphigus*, *gangrene*, *aortic stenosis*, *unbearable itching of the soles of the feet*.

The Toad and the Salamander as Drugs.—Hewlett²⁸ shows that the old practice of prescribing prepared preparations of the toad as remedies for dropsy was not so absurd as might at first appear, for, as he has shown, a substance is secreted by the toad's skin that is very like digitalin, and hence may have a favorable effect in cases of cardiac dropsy. It would appear that the active principles of the venoms of the toad and salamander are totally different substances from those of snake venom; the former being alkaloidal, while the latter are proteid in nature. Curiously enough, the venom of the toad and salamander is fatal to the animal which secretes it only in comparatively large amounts. The salamander appears to be remarkably refractory to certain poisons; it is only completely "curarized" by forty-three milligrams of curare, while morphine is apparently quite inactive. It has been demonstrated by actual experiment that the salamander's blood and blood serum act as an antitoxin toward curare. The article seems to show that the belief of the ancients in the venomous nature of the toad and salamander was not altogether devoid of foundation. [Science has again "discovered" active principles in substances long since used by homeopaths.—ED.]

The Action of Sulphur.—Evans of Chicago² observes that this mineral induces in the animal body a sluggish circulation in the venous capillaries commencing in slight degree and gradually increasing until a decided venous enlargement has resulted, when not only the capillaries, but the entire venous system has become more or less involved. This state has been attributed to a slowly-advancing disease in the ganglionic system of nerves, implicating the cerebro-spinal system at a later period. At any

rate, the progress of these conditions, either primarily or simultaneously, is essentially chronic in character, and sooner or later implicates all organs in the body, deranging their functions and changing the structure of tissues. So decided is this venous stasis that chronic congestion is found to be present whenever sulphur or the diseases to which it is analogous have for any considerable time exerted their influence upon the body-cells. Therefore the sulphur disease, artificial or natural, is essentially of low grade and chronic character. Sulphur, having the property of inducing such a constitutional state, is, therefore, one of the remedies capable of eradicating it when structural lesions have not gone too far or exhaustion of function has not been too great. For this reason it is a drug to be given when the general condition is such that complaints, numerous but not severe, have been present during a long period. At the same time, it is not infrequently called for in acute diseases, particularly the acute exanthemata, when the modified constitution of the patient has caused a deviation from the natural course.

***Cicuta virosa* IN ACUTE MENINGITIS.**—Dr. H. von Musits²⁰ treated J. N. R., æt. forty-three; male; married. A user of alcohol and tobacco. Bookkeeper. After the intense summer heat. Pathogenetic symptoms: Convulsion. Distortion of limbs. Head turned backward. Trismus. Froth from mouth. Biting his tongue. Oppression of breathing. Entire loss of consciousness and of power of swallowing. Convulsions, followed by complete exhaustion. Stupor. Swelling of face. Inability to move the tongue. The whole body seems to be of enormous size. Clinical Symptoms: Had three attacks of convulsions during twenty-four hours, followed by the swelling of the tongue and body. Extreme trembling of the hands. Articulation difficult. Next day profuse watery diarrhaea stools < by any noise, sudden entrance of any person into the room or loud talking. > by rest and dark room. Remarks: Several times previously has had symptoms of nervous exhaustion. His brother, a physician, died last spring from paresis in consequence of excessive use of alcohol and drugging. After two doses of *cicuta vir.* 200 there were no more

convulsions and he was perfectly cured in two weeks. No relapse.—Dr. Henry von Musits.

Guasatunga; A NEW REMEDY.²²—Dr. Oliveira writes from Brazil that he has prepared an excellent tincture of an indigenous plant, known as *guasatunga*, which has proved most efficacious against the bite of serpents, accompanied with bleeding at all the orifices of the body (symptom of the bite of the rattlesnake). He also informs us of the admirable action of another native plant, prepared by him, in a case of naso-pharyngeal polypus of more than four years' standing. All the resources afforded by the materia medica having been exhausted, with invariably negative results, he administered the new remedy, and, to his great surprise, saw the polypus grow moldy, ulcerate, and drop off completely in from twelve to fifteen days. He used the remedy in the third decimal, sprinkling the polypus three times daily with the first decimal trituration. The name given by him to this plant is *carcinomæ herba*.

We regret that Dr. Oliveira has not had time to make the proper pathogenesies, which, it is to be hoped, will soon be furnished by observation and experiment.

Hepar Sulphur IX IN PURULENT NASAL DISCHARGE FROM A MARE.²⁰—One of my patrons asked me if I would prescribe for one of his farm horses. I replied that I would treat any dumb animal belonging to a patron of our school. He said "he guessed the beast would die any way. It seemed to have terrible gatherings in its head, breaking and discharging through the nostrils." The local veterinarian treated it first for pneumonia, and finally said it would die and there was no need of his coming any more. Subsequently it broke, discharging through the nose. This had occurred several times. It was the most profuse discharge of yellow pus from the nostrils that I had ever seen. Before it would break she would be dull, stupid, dizzy, and unable to eat or drink. Afterward she would brighten up and pick at her food for a few days until the abscess began to refill. Clinical symptoms: Profuse discharge of yellow pus from the nostrils. Remarks: Five-grain powder every three hours. It did not break again and improvement was rapid, to

the great astonishment of my patron farmer. He allowed "them powders did stink enough to do some good."—Dr. Leonard.

Ptelea Trifol. *φ* IN HEPATIC DISORDERS.²⁰—Mrs. A. W., between fifty and sixty years of age, applied for treatment in spring of 1896. Was the most disconsolate looking and unpromising case. Had symptoms of enlarged liver. Helonias and chelidonium gave no results. Clinical symptoms: Thin and emaciated. Whitish, sallow complexion. Easily out of breath. Tendency to œdema of feet and ankles. Distress and fullness in stomach after eating. Cannot lie on the left side. Feeling of weight, pulling and dragging from right side in region of liver. Liver feels full and bad. Remarks: Three doses a day. A marvelous change took place in her appearance. Regained usual flesh and color. I thought she could not live a year when I first saw her. To-day she is practically well.—Dr. Leonard.

Apis Mellifica.—Gibbs Blake, M. D.²⁴—Although the provings of this drug in the Cyclopædia of Drug Pathogenesis are numerous and full, they are wanting in respect of pathological changes. A paper by Dr. Langer of Prague, published in the *Archiv für experimentelle Pathologie und Pharmakologie* (Band 38, s. 381), gives a full account of the physiological action of the poison of the honey-bee. In the first part of the article he describes the anatomy of the stinging apparatus, the physical and chemical qualities of the bee-poison, in a very complete manner. He succeeded in isolating a considerable quantity of the poison.

Dr. Langer thinks that the post-mortem appearances, the local necrotic and irritating effects of small quantities of the poison, its power of destroying the red corpuscles, and the production of hemorrhage place the bee-poison in the same category as that of the vipers and rattlesnakes.

I think that the following account will be a useful supplement to the former provings of *apis*:

The local application of the bee poison produces a necrosis of the tissues in the center of the spot to which it is applied. Around this center there is infiltration of round cells, œdema,

and hyperæmia. Phagocytes help to eliminate the poison. The local application also causes the animal to eat and drink to a larger amount than in a state of health, and often produces albuminuria. The results of the gradual intravenous injections of 6 cubic centimeters of a 1.5 per cent. solution of the pure bee-poison are thus given. In fifteen minutes after the first ccm. was injected, the diminution of the blood pressure was very marked, with slowing of the pulse. Gradually the blood pressure increased, and almost recovered its original state. The further injection of one-half to 1 ccm. did not again produce diminished blood pressure, but the continued movements seemed to increase the blood pressure. Clonic spasms became gradually universal with trismus, nystagmus, and emprostotonos. During brief pauses of spasm the animal lay on its side, paralyzed. Respiration gradually ceased.

Post-mortem.—The pupils were widely dilated. The brain full of blood; no hemorrhage into its substance. The veins of the meninges full of blood. The pericardium completely distended with blood-stained serum. The right side of the heart much dilated, the left side contracted; fluid dark blood, with some fresh clots in the cavities of the right heart; the endocardium, as well as the intima of the large vessels, markedly stained rose color. A microscopical examination of the blood showed very few red corpuscles; the blood very lake colored, with much dissolved blood-coloring matter, and with the spectroscope showed metaglobin. The lungs were full of air, and small hemorrhagic infarctions were seen on the outer surface. The liver was much congested; no hemorrhages were visible; the gall bladder purplish; the mucous lining much congested and bloodstained. No obvious change in the spleen. The kidneys were much congested, the tissue uniformly discolored with blood; the pelvis also much congested. No urine was found in the firmly contracted bladder. Many ecchymoses the size of a lentil were found on its mucous membrane. The intestinal canal was stained throughout with blood. The duodenum, jejunum, and ileum contained bloody mucus. On the peritoneal coat of the stomach there were many hemorrhagic points. The pancreas was infiltrated

with blood. The glands of the mesentery also showed lenticular hemorrhages.

We find in this proving that the use of apis for dropsical effusions is confirmed, and especially for effusion into the pericardium. The proving also suggests the use of apis in the exanthemata, when accompanied by hemorrhages, especially as they are met with in cases of measles of severe type.

A Cough of Corallium Rubrum.—Dr. H. O. Rockefeller⁶ treated a boy of ten, afflicted with a cough just like the barking of a dog. His cough produced so much alarm in the waiting room that several thought the boy had hydrophobia and kept watching him all the time he was there. He had a dog which had a similar cough and died on April 22, 1897, and on April 24 the boy began with this cough and continued coughing incessantly ever since, not giving him any rest during the day, but at night while asleep he would be free from cough, only on the morrow to resume the cough again.

The boy had never been bitten by the dog, which was a large St. Bernard four years of age. He never played much with the dog. The next day after the death of the dog the coop was cut up and the boy carried the wood in the house, and on the following day he began with this peculiar cough.

Atropine had suppressed the cough, while its physiological action lasted. Belladonna gave no relief, so *corallium rub.*, 3x trit., was given.

In three weeks he called and was much improved, and said he was better each day than he was the day before. Had him to continue with the same medicine, but not to take it as often as before.

He did not call again for two weeks, when he informed me that he had been free from the cough for two days at a time, and as he was out of the medicine came for more. Gave him more of the same medicine and have heard good reports from him several times since, and his mother informed me on November 15 that he has been free from the cough since the middle of July.

Pilocarpine IN NIGHT SWEATS OF PHTHISIS.—Dr. D. H. Weaver was called to a case of consumption, finding a lady who had not been out of bed for twelve weeks. With the lungs

almost entirely gone, there was no hope of recovery. Dr. Weaver therefore prescribed with a view to relieving some of the most annoying symptoms, of which profuse night sweats were the worst. The garments and bed clothes were made wringing wet nightly, and the patient was much exhausted. A number of prescriptions of what seemed the simillimum were without results. Thinking of the physiological (so-called) action of pilocarpine, he put three drops of the fluid extract in a half glass of water and directed her to take a teaspoonful every hour, from 6 to 10 P. M. The effects were magical. She had no more night sweats for a week, and afterward they were always controlled with the pilocarpine until she died, ten weeks afterward. Pilocarpine was the simillimum.

Ignatia IN EPILEPSY.—Dr. Hillberger^{9, 29} reports the following case: A girl from Dalmatia, eighteen years old, with a genuine Italian constitution, very vivacious, excitable, finely cultivated, formerly always in good health, for the last six years, ever since the commencement of her catamenia (in Italy this precocious maturity is not rare), had to suffer from cramps and pains as often as her monthly period set in. Four years ago, in consequence of a fright, she had a fit like tetanus, lasting several hours; this occurred almost regularly since every two months. These attacks, resembling tetanus more and more, took the form of epileptic fits, with severe convulsions and syncope. The free intermissions became ever briefer, so that they finally recurred almost every month or immediately after the menstruation; and at last they appeared at every casual occasion, when the patient became strongly excited. According to the practice of the physicians in Dalmatia she had been treated with frequent venesections, which, of course, only aggravated her case. Later she received valeriana and zincum, and finally ferrum and lapis infernalis in pretty strong doses, but all in vain. For a year before I undertook her case, weary of the unsuccessful former treatments, she had not used anything. Immediately on taking her case I gave her ignatia 6th, 3 pellets every evening, and after using this remedy alone for two months she was perfectly cured, and remained so until three years later, when she died

of acute pulmonary tuberculosis lasting three months, the cause of which was unknown.

Proving of Anacardium *φ*.—Dr. M. Louise Turton,²⁰ while running up the drug in her office, let a few drops fall upon her hand, and, without thought, touched the left side of her face. The next morning the left eye was swollen and inflamed, having paroxysms every half hour of great burning and itching, which would frequently last about five minutes, and, passing off, leave no other symptoms than a feeling of fullness and heaviness. The following morning the face was greatly swollen, the eyes almost closed, the skin leathery to the touch. By the third day the condition simulated that of erysipelas, without the fever. To the naked eye there appeared only a smooth, deeply red surface of the epidermis, aggravated by cold air; but, on touch, a sticky substance oozed out, which showed evidence of very minute vesicles.

After five days the œdema subsided, and desquamation in small flakes occupied several days. The affected parts were the face and small portions of the neck and back. The hand escaped; apis and arsenicum did good work in a short time. The eruption resembled rhus tox. poisoning, which had on three occasions occurred in the doctor, but the oozing of a sticky substance was lacking in the rhus eruption.

Chloride of Ammonium IN DELIRIUM TREMENS.—“Some time ago,” says Dr. W. Bourne Gossett,²⁸ “I was called to see Mrs. —, a lewd woman. She had been on a drunk for eight days, and just before I saw her had had the usual reptile hallucinations. I found her very restless, moving incessantly, and by force she was made to stay in bed. At once I sent to a neighboring drug-store for a dram of chloride of ammonium, but before getting it she was beginning to get more excited and seeing ‘snakes.’ As soon as I got the ammonium I at once gave her half a dram in a large quantity of water—four ounces—and had her drink it in one or two gulps. In fifteen minutes she was quieter, and in fifteen minutes more I gave her the other half dram. In a short time she was asleep, and slept for six hours. She awoke feeling much better, and had no more trouble. I should not

hesitate to give a dram, and repeat the dose in half an hour, if the patient was not better."

Carbo Vegetabilis IN COMA.—A patient with chronic Bright's was brought to the notice of Dr. M. Louise Turton when brain symptoms were so rapidly coming on that coma occurred three hours later. The radial pulse was imperceptible, her lower jaw dropped, there was no reaction to the pupils, the body was covered with cold sweat, the features were sunken, in fact a perfect picture of death presented itself.

Although it seemed almost useless, carbo veg. 3x was advised. A small powder was placed in half a glass of water, and administered in teaspoonful doses. In ten minutes after the first dose she could see a slight change. By the third dose the patient opened her eyes, began to be warmer, the pulse became strong, and from that hour she made a rapid recovery. One year from the date of her serious sickness, she was bright, strong, and happy and as intelligent as before her illness.

Jambul IN DIABETES.—Dr. Reynold W. Wilcox has been observing the effects of jambul in glycosuria. The drug is of ten years' use in this country, but of twelve centuries' use in India. We read that in 775 A. D. it was used to reduce the secretion of urine.

The theory as to the mode of action of the drug is based upon the most recent physiological discoveries, which show that in the alimentary tract the carbohydrates are so changed that little or no sugar gets into the portal vein. Any that does get into the general circulation is rapidly and completely eliminated by the kidneys. Weakening of the power of assimilation in the intestine occurs coincidentally with glycosuria. It has been found that the addition of jambul to a mixture of starch and diastasic matter, reduces very greatly the amount of starch converted.

Dr. Wilcox has secured remarkable results, giving the powdered seeds in doses of five to ten grains thrice daily. To get the drug pure the seeds should be procured and comminuted.

Quinine Nose-Bleed.—Dr. R. W. Hastings treated a boy of seventeen who had become chilled and tried on his own responsibility that harmless (?) and popular drug, quinine.

"Thinking to throw off the approaching

'cold,' as he had often done before, he took six grains of sulphate of quinine. There was no apparent effect on the 'cold'; but three hours later, after blowing his nose, he began to have nose-bleed, and had six sharp attacks within three hours. Pressure under the upper lip checked the flow each time in two or three minutes. On account of this recurrence he called at my office.

"Examination showed a throat nearly normal; nose closed with dried mucus and blood; pulse full and hard, but not rapid; occasionally a beat not so full as the others; temperature 99.2° F.; skin rather dry; no tenderness of abdomen; no headache or other pain. He said he had had no ringing in the ears, headache, dizziness, or disturbances of vision. Sense of fullness in his head was the same as before taking the quinine."

Iris Versicolor IN ECZEMA.—Dr. H. M. Dearborn² says that this is a drug with distinctly neurotic properties, but so far as the skin is concerned, the effects produced are chiefly reflex or secondary in order. The pathogenesis indicates that its primary action is on the gastro-intestinal tract and pancreas, while secondary effects may be manifested by hepatic derangements, nervous depression, neuralgic headache (migraine), pustular eruptions of the face, scalp, etc.

The cutaneous lesions may rest on a red base, the inflammation may tend to spread deeply or broadly (in lines), to suppurate slowly, and rarely become fungoid about the edges. The favorite locations for eruptions are the face, scalp (vertex), hands, and wrists, but when the other symptoms of iris are distinct, the region involved is less important, and even the form of the lesion need not contra-indicate this remedy. Sensation of soreness, tenderness (to touch), itching, and tension are most common. These are made worse by warmth, exercise, and pressure.

Pustular eczema of the scalp occurring in children, a similar form on the bearded portion of the face of adults, or at any age on the hands and wrists, giving a history of frequent gastro-intestinal and bilious attacks or headaches, or accompanied by such indications for iris, may be speedily cured by this drug.

Chopcheenee *φ* IN SYPHILIS.⁶—This is a plant indigenous to India and other Eastern countries. Some Indian medical writers are of the opinion that this medicine was introduced into India by Chinese traders. However it be, this much is certain, that this medicine has been in use in India for a very long time, as we find evidenced by medical works written some three hundred years ago. The root is the only part used as medicine; it is said to be useful in rheumatism, epilepsy, insanity, and particularly in syphilis. It is a most renowned medicine for syphilis in India. Its action is more decided in the secondary stage, especially when the skin and mucous membrane are the seat of suffering. It is a non-poisonous plant, and so its action is mild and not so violent as that of mercury; still it is in no way inferior to the latter in its efficacy in syphilis when the disease has gone to the secondary stage.

Dr. Gangadin of India, says: "I have in my practice seen its wonderful action in hundreds of cases of secondary syphilis. (I don't think it has any action in its primary or tertiary stage.) I have prescribed it in the following conditions of secondary cases with great benefit. It has invariably proved itself not only a relieving but a radically curing remedy.

"1. Eruptions of every kind—exanthematous, papular, vesicular, tubercular, pustular, squamous, and ulcerative.

"2. Mucous trouble of the throat—irritation, inflammation, or ulceration.

"3. Syphilitic condylomata or other excrescences.

"4. Nocturnal pains in the muscles and bones, which are generally present during the secondary period.

"5. Syphilitic rheumatism.

"Administration.—The action of the medicine is generally known within one to three weeks; it should be continued for a sufficiently long time, according to the severity of the symptoms and chronicity of the case. I have always used it in tincture form. Dose: 10 to 30 drops in an ounce of water three times a day."

Actæa IN INSOMNIA.—Dr. Geo. Burford⁷ removed a large ovarian cyst from a woman in the seventh month of pregnancy. For the first two days the convalescence was uneventful.

On and after the third day the mental condition of the patient underwent a noticeable change. Her conversation and replies were incoherent and disjointed; during the day a fatuous smile accompanied articulation, and her mental state seemed in general that of hebetude. There was also a persistent tendency to push down the bedclothes. At night the tout ensemble was that of irritability; she would repeatedly make efforts to get out of bed; and sleeplessness was pronounced. Belladonna was given at short intervals during the day, with gelsemium on the third night, aconite 3 on the fourth night, and a full dose of morphia on the fifth night. Of these remedies, the morphia only secured any sleep, and that merely for a short period of two hours.

Finally actæa (racemosa?) ix was prescribed, given four times daily.

The result was almost dramatic: the first night ensuing the patient had four hours of continuous sleep, the next night six or seven hours, and thereafter the insomnia vanished. Contemporaneous with the improved capacity for sleep came general betterment in the mental condition, and, four or five days after the first administration of actæa, the convalescence became and continued smooth and easy, the mental symptoms vanishing.

At term, by an easy and uncomplicated labor, a well-developed healthy child was born, and the puerperium was without impediment.

Bufo Rana IN EPILEPSY.—Dr. W. A. Dewey¹¹ says that epilepsy arising from fright, self-abuse, or sexual excesses will often find its remedy in bufo rana. The aura preceding the attacks starts from the genital organs; even during coitus the patient may be seized with violent convulsions. In another form for which bufo is suitable the aura starts from the solar plexus. Previous to the attacks the patient is very irritable, often talks incoherently, and is easily angered. It is in the sexual form, that brought on by masturbation, that bufo is especially useful. It has also proved useful in severe cases in children where the head is drawn backward in the convulsion.

Kali Nitricum IN DIARRHEA FROM VEAL.—Dr. E. V. Rose⁹ reports the following interesting verification:

November 20, 1896, at 7 A. M., I was requested to visit Mrs. G., æt. sixty, and found her suffering from an attack of diarrhea which had been going on for past three days. She informed me that it was brought on from eating a small piece of veal three days previously. She had had one previous attack, caused as she believed from partaking of veal; this attack lasted some six weeks and brought her to a very low state, and she was fearful that this attack would be even more severe, as it had so far presented a more violent character. With pencil in hand I jotted down the following: Stools frequent and profuse, as many as twenty in twenty-four hours. Stools watery, dark brown in color. Before stool rumbling and griping in the umbilical region. After stool great prostration. Concomitants: Loss of appetite, thirst, tongue clean, nausea, constant but more severe at times; feel weak. Modalities: Aggravation from eating veal. Bell's Therapeutics of Diarrhea, etc., gives but one remedy as having the peculiar aggravation from eating veal, viz.: kali nitr. Boenninghausen's Therapeutic Pocket-book gives the following: ars., calc. c., caust., chin., ip., k. nit., nux v., sep., sul., verat. a., zinc.

My first thought was to give ipecac., but after considering the symptoms of kali nitricum as given in Dr. Bell's work I decided on the latter, giving two powders of kali nitr. 3m. (Jenichen), one hour apart, and plenty of placebo to follow. Diet: "Scalded" milk.

November 21, 10 A. M.—Great improvement, stools gradually grew less than during previous day. No stools during the night, sleeps quite soundly, feels quite well this A. M., but weak, appetite better, one quick natural movement this A. M.; she continued to improve and has upon three occasions since the last attack partaken of veal without any ill effects.

"Some persons always have diarrhea after eating veal. The curability of such cases with kali nitr. needs somewhat more confirmation, but no other remedy has had this symptom so well confirmed as yet."—Dr. Bell.

Mercurius Corr. in LOCOMOTOR ATAXIA.—Delamater of Chicago¹⁰ records the case of a man thirty-nine years of age who presented all the classical tabetic symptoms, including gait,

ataxia, lost knee-jerks, and anæsthesia, together with a history of probable syphilitic infection, at the age of twenty-seven. The diagnosis of locomotor ataxia was made unhesitatingly, and merc. corr. 3x trit. was given three times a day. For a month he reported steady improvement, but two weeks later he did not seem so well, and complained that the legs were colder, pains more severe, and formication in legs and feet. Ergot 3x trit. was given for two weeks. At the end of that period he was improved, and merc. corr. 3x was resumed. At the end of six months every trace of the trouble had disappeared, and six months later he was still in apparently perfect health.

Was it locomotor ataxia? The symptoms and history seemed conclusive, but Professor Delamater does not believe that there could have been any sclerosed tissue in the patient's anatomy. It seems impossible that any remedy could cause such nutritive changes that in so short a time sclerosed tissue could be replaced by healthy. He is inclined to believe the condition simply one of congestion of the cord, and that the use of ergot for two weeks was sufficient to constrict the blood vessels, while merc. corr. assisted in the process by its action on the blood.

Gelsemium in PUERPERAL CONVULSIONS.⁷—Mrs. G., aged twenty-four years; expecting her fourth child, complained of a raging headache, the fingers were convulsively closed, the feet icy cold, the head hot, the face bloated. I had warming-pans applied to the feet and sent home for tincture of gelsemium.

Five minutes after my arrival she had the first convulsion, and this was followed by five more; these were more violent than any I had ever seen before. There were no labor pains, but the water had passed off the day before, as the nurse reported. The os uteri was only slightly dilated. I at once mixed twenty drops of tincture of gelsemium with half a tumblerful of water, and gave a teaspoonful every five minutes, but had much trouble in getting her to swallow. In half an hour the muscles began to relax somewhat and the convulsions diminished, and after an hour the patient regained her consciousness, the pulse was softer, and all the symptoms milder.

Next morning I found the patient cheerful

and bright ; the headache, from which she had suffered almost continually for almost fourteen days, had almost disappeared. The patient was directed to keep her bed and received gelsemium 3x every three hours for two weeks. Then I was again called and found the patient in full labor, but the parts were very dry and hot. I had the parts well anointed with oil, and in ten minutes there followed the delivery of a healthy girl.

Lachesis³⁰ IN PROLAPSUS RECTI.—Dr. A. C. Bhaduri³² of Calcutta was called one day last September, at about 5 P. M., to see a case of prolapsus recti. He says: "On going to the patient's house, I found him in extreme agony, owing to the sphincter ani being in a tonic state of contraction, tightly closing upon the prolapsed rectum. There was a throbbing pain at that part, it was extremely tender and painful. On manipulating the part in the hope of replacing the prolapsed portion of the rectum, the tenderness and painfulness increased so much that the patient would not allow us even to touch it again. We found that unless the part be replaced soon, there was every chance of gangrene setting in. So we at once determined to select an appropriate medicine, and on finding a stitching pain passing upward, and the other symptoms corresponding, I prescribed lachesis 30 and gave one dose then and there, and left few more doses with the patient, to be repeated, if necessary. In the mean time, we thought it advisable to provide ourselves with everything necessary to put the patient under chloroform and then try to replace the rectum ; so we went home, promising to return as soon as possible. On reaching home, as I was preparing to start for the patient's house, his eldest son, a student of medicine, came to me, to my great satisfaction, to give me the news that his father's rectum had got in within an hour after the administration of the medicine, and he was feeling all right. He unhesitatingly declared that such action from internal medication could never have been obtained in the so-called rational system of medicine."

New Theory of Drug Selection.—Dr. A. W. Woodward⁶ has observed in the proving of lycopodium the sequence of physiological disturbance caused by the drug. He notes that

there is a primary digestive disturbance, followed by cutaneous, respiratory, spinal, and genito-urinary symptoms. Adopting the hypothesis that the drug is useful in any disease in the course of which this sequence is observed, or where the associated symptoms present this relative degree of severity, he finds it illustrated in a number of reports of cures from representative homeopaths.

A similar study of lachesis results in the determination of the sequence—cutaneous, respiratory or circulatory, digestive, and finally mental and spinal. He notes that the symptoms not only appear in that order, but are relatively prominent in the same order. Clinical evidence to the same effect is adduced. Dr. Woodward concludes that the homeopathic totality of indications will hereafter be found more certainly in a *group of disturbed functions* rather than in a *group of special symptoms*. He suggests that if it should be found that each group of disturbed functions stand for one particular remedy, we will have taken one more step toward practical and scientific therapeutics.

Periploca Græca AS A CARDIAC STIMULANT.—Dr. Bourginsky³⁷ reports that this asclepiadaceous plant—indigenous to Greece, western Asia, and southern Europe, and naturalized in the western part of the State of New York, and known by the common names of climbing dog's-bane, milk-vine, silk-vine, Syrian silk-plant, and Virginian silk—contains a glucoside, periplocin, which he regards as an isomer or polymer of Schmiedeberg's digitalin. From experiments on frogs he concludes that the plant contains a heart-poison that acts like the other cardiacs on the function of the heart. In large doses it stimulates also the respiratory and vomiting centers. Its antagonist is atropine. The fluid extract may be given in doses of from 5 to 10 drops, and periplocin in doses of 1-30 grains.

Peripheral Neuritis from Arsenic.³⁷—Dr. Colman showed a girl, aged twelve, who was admitted to the Queen Square Hospital in December, 1897, with the following history: From September 27 to October 28, at another hospital (with the exception of six days, when the treatment was discontinued on account of gastric disturbance), she was given 15 minims of liquor arsenicalis three times a day for the cure

of chorea. She left that hospital cured of the chorea and apparently quite well. On November 10 she complained that her legs were weak and tingled; in another week there was distinct ankle drop. When admitted to Queen Square there was almost complete paralysis of all muscles of the extensors below the knees, with well-marked reaction of degeneration. There was also some weakness of the extensor muscles in the forearm, with diminished faradic reaction but no reaction of degeneration. There was no alteration of cutaneous sensibility, but there was great tenderness of the leg muscles. There was well-marked arsenical pigmentation in the neck and groins. She had been kept in bed and treated by massage and electricity, and she was rapidly recovering. The case was of interest by reason of the delay that occurred between the cessation of the arsenical treatment and the onset of the symptoms. It also showed that these somewhat heroic doses of arsenic, which were so highly vaunted in the treatment of chorea, were not unattended by serious risk. Several instances of similar paralyzes had come under his notice, and in one, at any rate, recovery did not take place.

Dr. Beevor observed that one ought to be very careful in the use of this drug. He had had a case in an adult who took 15 minims thrice daily for six weeks, and then presented double wrist drop with severe pain in the legs, but after two years recovered.

Arecoline AS A MYOTIC.—Bietti²⁷ has been investigating the action of this alkaloid obtained from areca or betel nut. A 1 per cent. solution instilled into the conjunctival sac causes some burning and lachrymation and hyperæmia. After four or five minutes the pupil begins to contract, maximal contraction being reached in about twelve minutes; this lasts a quarter of an hour, after which the pupil regains its normal size in about two hours, or three hours if a 2 per cent. hydrobromate solution is used. At the third minute the ciliary muscle begins to contract, as shown by approximation of the near point; this goes on to a maximum till the tenth or twelfth minute, after which the near point recedes to its normal position in the course of forty or fifty minutes. Cocaine in 4 per cent. solution does not hinder the action of arecoline

on the pupil. Arecoline is unable to overcome the mydriatic action of atropine or scopolamine. In the case of a woman with simple glaucoma in both eyes, arecoline produced contractions of the pupil where 1 per cent. eserine failed. It would appear to act more promptly and more energetically than eserine, but its duration of action is less.

Poisoning with Carline Thistle.—Dr. Them. Zammit²⁷ of Malta records this case, which occurred at Bahria, Citta Vecchia, in the third week of November. The carline thistle (local name, Xeukit-il-Miskta) is the *carlina gummifera* (Dec.), *atractylis gummifera* (Lin.), a plant common in Malta and in other countries on the shores of the Mediterranean. It is notable for its root, which can grow to enormous proportions, and for its purple composite flower surrounded by radical spinous leaves.

Three children ate the root of one of these plants, which they cut with a knife; two of them, a girl aged eight years and a boy aged nine, eating it rather freely. They ate it on a Wednesday afternoon, and did not complain at all before the catastrophe came on. On Thursday evening the girl was taken ill, and the parents were soon alarmed at the stertorous breathing and at the drowsiness of the child. There was some retching, but no actual vomiting. Early in the morning the child became collapsed and died before any medical aid could be got. In the evening of Friday the boy returned home and refused to eat. He was told that the girl had died, and he confessed that they had been eating some roots the day before. He went to bed, and soon after the family were startled at his difficult breathing. The father of the girl (the children were cousins) was sent for, and he declared that his daughter had suffered in the same way. The district medical officer was hastily called, but it was too late, as the boy died a few hours after, comatose and with marked signs of asphyxia.

At the *post-mortem* examination the two bodies had the same appearance. The tongue protruded slightly between the lips, the pupils were greatly dilated. The appearance consisted in a general congestion in the venous system. In the girl all the organs were highly congested, the lungs and the brains especially so. The stomach

showed capillary injection in limited areas. It contained a brown liquid, in which fibers of the ingested root were identified. The intestines were congested and contained abundant solid feces. The heart in both cases was flaccid, and contained a little dark fluid blood.

In the boy the congestion was not so well marked in the organs, with the exception of the brain, of which the veins were injected to the extreme. No trace of the root could be found in the stomach, but the fibers were found abundantly in the intestines, which contained a very great quantity of solid feces. No attempt was made to examine chemically the organs, as the poisonous principle of the plant is not known to me.

The third child, a boy of about twelve years of age, ate a small quantity of the root. Up to Saturday morning he did not complain of the least ailment, but he was given a good dose of castor oil, which he very much needed, and is well.

Glonoine IN CHRONIC PALPITATION.—Dr. Ord.³⁵—Miss H., æt. twenty-six. Since severe influenza two years before had suffered from constant distressing palpitation of heart. Two months ago she had slight influenza, but made a rapid recovery in every way except for the palpitation, which became worse. She is naturally active and cheerful, fond of tennis and exercise. Her pulse is always 120, heartbeats diffuse and tumultuous, visible throbbing of carotids, but the sounds are clear and there is no murmur. The thyroid is not enlarged. Periods regular, but scanty. Walking slowly does not increase palpitation, but singing, any exertion, any emotional disturbance, even going to church, or a hearty meal, bring on violent beating. . . Secret of symptoms was minutely investigated. This showed that the violent attacks usually commenced with heat and flushing of face, with increasing throbbing in the left side of chest, which makes her feel nervous and apprehensive; then there is feeling of indigestion and discomfort in the stomach, with trembling all over and distress if she moves. After sitting quiet for a time this generally passes off.

The sequence indicating glonoine, which agreed with the symptoms, pilules of the 6x dilution were given, sufficient for a month, as the

patient was leaving Bournemouth. In four weeks she wrote to say she had finished the pilules and was now very much better; she hardly ever felt her heart, was playing tennis, singing, and taking long walks, and had not felt so well for many months.

Belladonna IN FEVER AND DELIRIUM.⁴⁰—September 13, at 4 P. M., I discovered my daughter, aged four, with a light fever. It increased during the night, bowels running off, and at 7 A. M. fever 104½°, delirious, picking the bed-clothes and grasping at objects in the air, pupils dilated, and a wild look; throbbing carotids, and occasionally crying as though she was frightened at something. We were very much alarmed, and wired for a homeopathic physician, but could not get one. Feeling that I must give relief, I began at once on bell. every twenty minutes until about 10 A. M., when improvement began, then every hour. At two o'clock she seemed conscious, and asked for something to eat; temperature then 103°. After eating, bowels moved, and she went to sleep, and at 10 P. M. had no fever, and has had no indication of return. Is up and looks as well as ever. I told an allopathic physician of the case, and he said he would never have risked bell. if it had been his child.

Silicea IN FEVER CASES.—Dr. C. S. Kali, L. M. S., Calcutta.⁴—Mr. M. N. Dey, aged thirty-five years; robust, well-built constitution; short stature, abdomen tumified; has had fever two days; there was intermission. Paroxysm used to come from 8 to 10 A. M. There was a severe chill. During the chill I noticed "icy coldness of the feet and legs as far as the knees." Heat was excessive, with profuse perspiration all over the body. He used to drink water in the hot stage. The above symptoms underlined were my only strong guide to select silicea, and its 30th potency I gave; for two days improvement took place, but in a very slight way, which gave me no such satisfaction as we expect from our homeopathic drugs. I was in a puzzle to think whether potency should be changed or new remedy should be invoked. But on seeing slight improvement as regards the intensity of the paroxysm, I intended to change the potency, but then in my box the higher potency was wanting, so I gave silicea 3d trituration every three hours,

which did wonders. This day the attack was very slight, and the next day there was no fever at all, and the trituration was given only thrice a day, by which the patient felt all right within a couple of days.

Remarks : (1) In my life I never used silicea on 3d potency in any disease, because my idea is that the drugs of inert nature, such as silicea, sulphur, carbo. veg., calcarea, cannot acquire a proper power below the 30th potency. It lays open a problem in my long-searching potency questions.

(2) The symptom "icy coldness of the feet and legs as far as the knees" during the chill stage of silicea in Dr. H. C. Allen's excellent Fever Treatise being made most prominent by letter, of antique face, gave me full hope to stick to this drug only, and the symptom in question was so very distinctly marked in the patient that I did not think it advisable to change.

Aranea Diadema IN MALARIAL CONDITIONS.—Dr. H. A. Roberts²⁰ reports the following case :

Man about thirty years of age, of nervous temperament.

Malarial poisoning of a severe degree.

Weakness all the time except during chill.

Chill while clock strikes 4 p. m. daily.

No premonition to chill.

Shaking and exceedingly cold all the time.

For hours afterward it seemed impossible for him to regain his normal heat.

No fever at any time.

No thirst at all.

Chill more severe on stormy days.

He had been under old school treatment for two weeks and had taken as high as forty grains of quinine a day, with no effect whatever only to produce the unpleasant symptoms of that treatment. I prescribed aranea zooth at 2 p. m.; and at 4 p. m., the time for his chill, he was exceedingly cold, but did not shake with cold as he had done before, and he regained his normal warmth much quicker than before. The next day he was at work and had no bad symptoms at 4 p. m. at all, and has not had a chill since; moreover, having had a fit of sickness since,—the grip, which laid him up for over a week,—showing none of the periodicity which is so common a sequel of severe malarial poisoning.

Crocus IN RHUS TOX. POISONING.—Dr. E. B. Morey¹⁴ relates the following striking verification of crocus :

"A domestic was badly poisoned in July, 1895, by poison ivy on her face, neck, chest, arms, and hands. Under belladonna and rhus internally, and zinc ointment externally, to relieve the unbearable itching and burning, the case appeared to make a rapid recovery, and the patient was able to go to her home several miles away in about a week. The poisoning occurred during her menstrual period. About the 1st of September, 1897, and without to her knowledge having been near the ivy again, she had another severe attack very similar in character, and this time it also developed during the menstrual period. A short time ago she came to me again, very much alarmed, as her old trouble was apparently developing rapidly and as bad as ever. Upon questioning her carefully, I learned that since she was so badly poisoned she has frequently had some recurrence of the eruption, and always at the menstrual period. She said her flow came on about a week before she came to me the last time, that it was very scanty, dark, and clotted, as had been the case for some time; that she had only fairly begun to flow when she ceased suddenly, and then the eruption appeared. The scanty, very dark, and clotted flow led me at once to think of crocus, which I gave alone. A few days later she reported that the first dose re-established the flow, which was normal both in quantity and color, and the eruption at once disappeared entirely."

The menstrual flow of crocus is usually profuse, while the dark clots are only referred to in clinical symptoms. The dark or black-clotted stringy blood is, however, a well-established characteristic of crocus.

Aranea Diadema IN NEURALGIA.—Dr. Roberts²⁰ relates another typical case : Married woman, aged twenty-eight, having had five children in rapid succession.

Neuralgia in trifacial, intercostal, and uterine and anterior crural nerves.

Pains sharp, shooting, following each pulsation of the arteries.

Pains only on right side.

Pains follow course of nerve tracks from terminal end to nerve center.

> from hard pressure.

< at menstrual period, especially before, but still during the whole cycle.

< 12 o'clock at night, unbearable, driving her out of bed.

< returning to bed until 5 A. M.

< again 3 to 8 P. M.

At 3.30 P. M. daily a sharp chill.

Aggravations appear like clockwork.

During an attack she cannot keep warm even close to a good fire.

< before and during a storm or cloudy weather.

In morning, on rising, mouthfuls of dark, coagulated blood roll up into the mouth. On one occasion it was bright red and not coagulated; this lasts for one or two hours, but there will be about four or five mouthfuls every morning; the taste of blood is always present. Upon physical examination of chest there are no râles and the lungs are perfectly sound.

Small area tender on pressure over pit of stomach.

During attack marked distention of abdomen, as large as though seven months pregnant.

Distention relieved when pain stops.

Menses every three weeks, lasting seven days.

Menstrual pain bearing down.

"Sensation as if the parts would protrude, and I often stand doing my work with my legs crossed so as to support myself there."

The zooth has relieved all of the symptoms, except now and then on stormy days she gets a little return of the neuralgic pains, and there is still tenderness on pressure over the pit of the stomach, but the menses returned to their normal time and duration.

Thuja IN SUPPRESSED GONORRHEA.—Dr. C. E. Fisher¹⁴ narrates the following: "A medical friend had gonorrhea in early life. It ran the usual course, subsiding under constitutional treatment in due season, and for many years there seemed not to be any effects traceable to it. Finally, locomotor ataxia symptoms began to show themselves. I suspected that the old gonorrhea might, perhaps, be responsible. Acting upon this hypothesis, I prescribed a few doses of thuja, and after two weeks of treatment there began to be evidences of urethral moisture, and within a week more he was showing a

plentiful discharge of thick, creamy pus. With the appearance of this his nervous symptoms began to improve, and in the course of a few weeks he was apparently well, neurologically speaking, but was draining like a sugar tree. Any sudden suppression of the urethral discharge would be followed by increase of nervous symptoms, while, on the contrary, he felt well physically and nervously so long as the flow continued. For more than six months this lasted, the patient improving steadily, until finally, under thuja, sulphur, and psorinum, administered almost if not altogether empirically, though always in higher attenuation, the discharge gradually subsided, the patient remaining well."

Zincum IN MENINGITIS.—Dr. Molson¹⁶ reported two cases differing widely as to cause. One was an infant, aged eleven months, who had suppressed measles. Wet packs and the ordinary remedies failed to bring out the eruption. When at the end of his resources, after three weeks of failure, he happened to see in Farrington's *Materia Medica* that zinc was capable of developing a hidden exanthem. Accordingly, he gave the patient this remedy in the form of zincum metallicum. The long absent eruption became fully exposed, and the child went on to a rapid recovery. Some years afterward a girl aged eleven years had meningitis, presumably from heat stroke. Her shrieks were frequent and distressing. Dr. Day, who saw the child in consultation, suggested the use of apis. For a short time there was some improvement, and then the child relapsed. Remembering his success with zinc, Dr. Molson decided to try this remedy again, and gave zincum phosphidum 3x trituration. From the moment this remedy was used the patient improved, consciousness was regained, and continued progress ended in an early convalescence. In both instances he was satisfied that it was the zinc which touched the mischief. He strongly advocated the early employment of this remedy, either in the form of zincum metallicum 3x, or zincum phosphidum 3x.

Mezereum IN ECZEMA.—Dr. S. R. Stone of Rhinelander, Wis., reports the case of Mrs. B., aged thirty, whose eczema was the most complete he had ever seen, entirely covering the body. The eruption was bright red, very scaly,

with intense itching. He gave mezereum cc. and then a few doses of sulphur. Relief was obtained at once, and she reported well in nine days.

Pulsatilla IN RHEUMATISM.—Dr. Stone also sends us the following verification :

"Mr. R., aged thirty-two, has been troubled for years by rheumatism. An allopath recently gave him something which removed the epidermis from a place six or eight inches in diameter over the left pectoral region. The only peculiarity I obtained was its tendency to change locations. Pulsatilla cc. effected a cure immediately, which has been tested by very bad weather. I am using pulsatilla more and more in rheumatism, and with eminent satisfaction. Also in dyspepsia, for which the guiding symptom is the feeling of a lump in the stomach."

Aconite versus Ferrum Phos. IN BRONCHITIS OF INFANTS.—Dr. Martin Deschere¹⁴ combats the idea that ferrum phos. and aconite should be given one for another on the assumption that one takes the place of the other. "Homeopathy does not recognize any substitutes ; either a remedy is positively indicated or it is not. Now in bronchitis ferrum phos. has acted to better advantage than could formerly be claimed for aconite. The reason is obvious, for it is more thoroughly homeopathic to the prevailing conditions.

Aconite presents a dry cough with great restlessness ; the cough is short, hacking, sometimes ringing, worse after drinking water and during the night. The child often grasps at its throat while coughing, indicating local pain. The respiration is labored, anxious, and quick, frequently with cough at expiration. The pulse is hard, full and strong in inflammatory affections.

This symptomatology certainly points more to an acute catarrhal or croupous laryngitis, where aconite takes the first rank.

While similar conditions prevail under ferrum phos., the greater similarity to bronchitis is shown in the short, dry cough accompanied by much rattling of mucus in the chest, both being aggravated during the night. The pulse is quick and full, but round, which rather corresponds to the pulse in children, especially in bronchitis, where it is rarely found to be hard and strong. The mental symptoms and fever

are much like aconite. In my experience ferrum phos., has quickly checked many a beginning bronchitis, also in children beyond the age of teething, who had had repeated and prolonged attacks. The potency is of little importance here, though I have never prescribed it below the sixth decimal.

Creosote IN CHRONIC CONSTIPATION.—It is reported by Dr. Vladimir de Holstein of Paris¹⁶ that he has used beech-wood creosote with marked success in chronic constipation, in cases where every other remedy, including abdominal massage and oily inunctions, had failed. The remedy was being used as a last resort with a view to its antiseptic actions in the intestines, hoping thereby to prevent auto-infection, which it was concluded was at the root of the difficulty, in the case of a young chlorotic girl afflicted with very obstinate constipation, and upon whom ferruginous and arsenical remedies had no effect. The surprise was therefore great to both patient and physician when, as a result of the creosote medication, normal daily stools were established, a fact which was later confirmed by observation in other cases of obstinate constipation. The best method of administering the creosote, it was found, was to give it with some diluent, such as milk, beer, wine and water, or water alone. The most efficacious dose was found to be 7 to 9 drops, taken immediately after meals. When the dose was found to be insufficient it was increased. To accustom the patients to the burning sensation produced in the throat by swallowing the remedy, this was given in commencing doses 1 drop, which was increased by 1 drop daily, until the proper results were had. The medication must be continued for several months, and not only overcomes the chronic constipation, but reestablishes the appetite, improves the general condition, and clears the complexion. Under the influence of the creosote, the dejections become quotidian, soft, and abundant, but are unaccompanied by pains or any other symptom of intestinal irritation. The creosote does not act as a purgative, but only by neutralizing an intestinal toxin that, in chronic constipation, paralyzes the intestinal tract.

Lachesis IN GANGRENOUS AFFECTIONS.—Dr. Lambrechts, fils, of Antwerp reports¹⁷

how he treated a young man of twenty-eight years who, strong and robust, developed a particularly grave form of typhoid fever. Although various homeopathic remedies were prescribed he continued to become worse and worse. On the fourteenth day intestinal hemorrhage set in, to be followed by profuse hematuria, which under ham. and acid. phos. decreased somewhat, when suddenly his penis swelled and became œdematous, and a blackish, shining spot appeared on the dorsum, which extended rapidly toward the glans, accompanied by the horrible odor characteristic of gangrene. The mortified parts were detached, thus exposing the glans and a part of the corpus cavernosa, which were covered with small and grayish ulcerations of a bad appearance. Antiseptic dressings of iodoform, after irrigation with a solution of carbolic acid, were applied. Eschars forming on the sacrum were also thus dressed. Under the influence of lachesis the gangrenous process was arrested. The patient, who was in a desperate state, with scarcely the breath of life left in him, improved considerably; the sacral ulceration cleansed itself and healed rapidly; the penile ulcer took on a healthier color and healed in fifteen days; his tongue cleaned up, his strength returned progressively with his appetite, and to-day he is in perfect health, and, beyond a circumcision, he presents no sign of the terrible danger which he ran.

While dressing this same case the writer accidentally inoculated a slight wound of his left index finger with the ichor from the penis. Though he immediately washed it antiseptically, the next day there were lancinating pains in the finger which progressively extended to the hand, forearm, and became so aggravated that he could not sleep the following night. The wound swelled and was bluish, livid, and of bad appearance. Under lachesis 6x the pains decreased considerably and abundant suppuration set in, the swelling decreased, and in ten days it healed completely, leaving a linear cicatrix which is now visible.

Symptoms in Therapeutics.—Dr. Chas. H. Evans³ discusses the apparently conflicting symptoms seen in the same case or drug proving. He shows that every process in the body is governed by two sets of nerves, as, for

example, motor and inhibitory, whose influence in health is perfectly balanced. Either natural or drug disease upsets this balance, and then symptoms of both kinds follow each other in a definite sequence. The disease symptoms in their consecutive order form the natural history of disease; the sequence of symptoms induced by drugs show a similar order of development and succession.

Dr. Evans claims that it follows from the origin and sequence of symptoms having opposite characters, physiologically and pathologically, that the claim that homeopathy is the law of cure is invalid unless the consecutive order of these two sets of symptoms were not recognized as an essential factor in the choice of a remedy.

Lobelia IN SPASMODIC CROUP.—“The Country Doctor”⁹ says: Years ago I used to dread a case of spasmodic croup as much, or more, than anything else. In real aggravated cases the sight is really dreadful, although the percentage of fatality is, of course, very low. However, since I took up the use of lobelia all dread and fear has vanished. That is ten years ago at least, so you will see that it is no new-fangled notion. I always carry in my case a vial of a preparation of my own make, made from the fresh plant, but I suppose that B. & T.’s lobelia infl. 9 would answer just as well; and whenever I get a case of spasmodic croup I give it freely. For a two-year-old child I average about seven drops to a dose, in a little sweetened water, and repeat every three or five minutes, until the child is relieved or vomits, which result is obtained in less than fifteen minutes. Then leaving a somewhat weaker mixture, which I order given whenever the “whoop” again appears, I wend my weary way home again for the night, and as a rule no further attendance is needed. I have compared this treatment with other physicians of all schools, allopathic: alum, sulphate of zinc, etc., and homeopathic: spongia, belladonna, et al., but none appears so certain, sure, speedy, and harmless.

Mistletoe (Viscum Album) IN LABOR.—Dr. E. M. Holland^{9 38} reports four cases in which mistletoe, 30 drops every twenty minutes, seemed to hasten normal labors without any drawbacks. One case will suffice:

"On the 14th day of July of the present year I was called to attend Mrs. B. in her third labor, some two miles in the country. I left home at 3.30 A. M. When I arrived at the house I found nothing to indicate that I would be permitted to return home sooner than—I will say a number of hours. I found presentation all right, some dilatation, but there was but little advancement. The pains seemed to be of excruciating character, but not the kind to do more than to wear the patient out. She told me that the same kind of pains had been on for a day and night, so I continued with the mistletoe in half-teaspoonful doses every twenty minutes. Pains came on; in just one hour her extreme agony ceased. Labor came on, and in half an hour more the child was born.

"In all these cases the placenta came readily and everything progressed well after birth. I said I left my office at 3.30 A. M., and I was at home again by 7 A. M. It may be that four cases are not sufficient to decide on the merits of a remedy, but the change was so decided and prompt that I am satisfactorily convinced that in mistletoe we have an oxytocic that is superior to all remedies hitherto tried."

Nitroglycerin AS A HEMOSTATIC IN HEMOPTYSIS.—Dr. Lawrence F. Flick* has had an interesting experience in the use of nitroglycerin. A patient apparently about to die from a hemorrhage which the usual old-school treatment of opium, ergot, tannic and gallic acids, ice, and salt failed to check caused him to question the cause of the hemorrhage. Answering that it is constriction of the blood-vessels and the application of too great a force from behind, he reasoned that it was unwise then to add more force from behind and further constrict the blood vessels. He determined to experiment with dilatation, and gave nitroglycerin, one-half drop of a 1 per cent. alcoholic solution every half-hour. The hemorrhage stopped with the first dose and did not recur. In three other cases he has had equally prompt relief.

Arsenical Neuritis.—Dr. W. Smith* treated Fred. R., aged fifty-four, chairmaker, residing in a boat-house. Drinks very little; of fairly good habits; nationality, German. In good health. First seen at my clinic on December 20, 1897. States that about three months ago, mistaking

rat poison, which the druggist said contained arsenic, for baking soda, he took a small teaspoonful. The immediate results were fainting, prostration, thirst, and severe vomiting, which lasted for three days. A few days after these severe symptoms had subsided he noticed a tingling and prickling in the finger tips and feet, which has been increasing.

Three months after he had taken the poison he complained of the following symptoms:

Heavy pains in lumbar region.

Frequent urination, sometimes scanty, at other times as much as a half-pint at each passage.

Occasional burning of urine.

Tingling and numbness in fingers and soles of feet.

Sensation as if boots were full of water.

Sensation at times as if something crawled from the knees to the toes.

Physical Examination.—Knee-jerk entirely absent. Muscles of arms and legs flabby. Emaciation, having lost thirty-seven pounds in ninety days (155 to 118 pounds). Feet and legs to the knees felt cold to the touch. Loss of sensation from the middle of the leg down. Below the knee the faradic irritability of the muscles was wanting, and present but slightly in the arms. Patient could stand and walk alone with his eyes shut. No dizziness. In walking he put his heels down first with considerable force. A subsequent examination of urine revealed an excess of bile pigments and urates.

At no time have the bowels given any trouble.

Strychnia IN PROGRESSIVE MUSCULAR ATROPHY.—Dr. A. K. Crawford,³ in reporting cases treated with this remedy quotes various authors to show the bad prognosis, and the statement of Gowers that strychnia hypodermically is the only means we possessed for staying the advance of a case of progressive muscular atrophy.

The following is one of Crawford's cases: Mr. J. K., æt. forty-nine. Reported at the clinic March 9. Said he was strong until three years ago when wasting of the right hand commenced. The wasting has been progressive since that time, until now the right hand and arm are useless. It is a skeletonized extremity

and hangs at his side limp as a flail. The left hand is now likewise invaded, and the man has to be dressed, attended, and fed almost like a baby. Of course he has his legs under him and can get about pretty well, but he is generally debilitated as well as helpless and discouraged. He had been the rounds of the various free dispensaries without any relief, and had been given plumbum in our clinic. The same response "no better" was given each time he returned the five weeks he was continued on this medicament.

On May 5 I got him started on the strychnia nitrate $\frac{1}{10}$ gr. hypodermically once a day. I likewise had the faradic and galvanic currents applied, from the cervical region down through the atrophied muscles twice a week.

When I first saw him the thenar and hypothenar eminences were gone, the metacarpal interspaces were shrunken, the arm muscles and deltoid were woefully atrophied, leaving the osseous structure of the limb and shoulder plainly visible. There was corresponding loss of function.

After about three months' treatment the man was able to dress himself, he could raise the arm fairly vigorously with the deltoid, he could flex the arm and raise the hand to the top of his head, he could grasp your hand feebly, and informed us that he could carry home a pitcher of beer with this lame member.

Potassium Iodide IN SPASTIC ATAXIC PARAPLEGIA.—Halbert of Chicago¹⁷ records the case of a man, aged thirty-six, who came to his clinic with a diagnosis, given by a local doctor, of "neuralgia of the nerves." He suffered with pain and inability to properly use his limbs, his gait was decidedly spastic, and at the same time he had lost all power of co-ordination. Six months previously he began to notice that it was difficult to get up from a chair, and to descend stairs was almost impossible. He had lost absolute control of the sphincters, and there was no ability to regulate the fecal or urinary discharge. He complained also of fulgurating pains and heaviness and numbness of the limbs. His history gave no clew as to the cause of his condition, his habits were exemplary, and there were no signs of a specific taint.

Careful examination showed that his right leg

had lost entirely pain sensation and electrical reaction, deep reflexes were lessened but not lost, muscle-sense was imperfect, and there was no co-ordinate control. The left leg presented almost contrary symptoms; the pain and touch sensations were exaggerated, electrical reactions increased, reflexes all exaggerated, and muscle-sense intact. In walking this limb flopped about with a decided spastic jerk. Neither limb showed any signs of wasting; the sign of Romberg was pronounced, but there was no involvement of upper or cranial nerves. The debility was apparently developing rapidly toward a paresis of the lower cord, the pathology including descending degeneration of the pyramidal tract and ascending degeneration of parts of Goll's and Burdach's columns. Hence his condition was a combination of spastic paralysis and ataxia, and as it involved only the lumbar cord it resulted in this peculiar paraplegia. He was given potassium iodide 3x and the regular application of static electricity. It is now four months since he began this treatment, and he is not only walking without the aid of canes, but he has quite perfect control of his limbs. The sphincter debility has disappeared, he has gained flesh and strength, the sensations are more nearly normal, and he has returned to his work with every hope of eventual recovery.

In such a case the fibrinous exudate in the central cord structure was not sufficient to destroy the tract fibers, and hence the cure was possible. Had he, however, been given the lower potency of the remedy the author fully believes that the degeneration would have extended to the deeper cord structure. This experience he has verified in many similar cases.

Borax IN DIARRHEA.—Dr. A. W. K. Chondbury² reports the following:

Patient, Ekeem Dalâl, a Mohammedan male adult, a quack using native medicines, but a firmer believer in homeopathy, as he has attended my dispensary on many occasions, for his own as well as his wife's sake, with good effect. On this occasion he came to my dispensary on the 7th of December, 1897. His case is as follows:

Aggravation in the morning, after a meal or a breakfast; increase since about a fortnight;

stools fermented, yellowish, slimy, with bad smell; head hot; pustular eruption on face, appetite not good; flatus hot; frequent urination; distention of abdomen by flatulence after meal; debility; cough, with thick expectoration, at the latter part of night till morning; threadworms pricking at the anus.

Given borax⁶, two doses—daily a dose.

Remark—Two doses quite restored his health; he reported thorough recovery by the two doses. Given sago for diet and allowed bathing.

Lycopodium IN CROUP.—The following case by Dr W. P. Wesselhoeft elicited decided differences of opinion at the Materia Medica Conference in 1897:

A child of five years every afternoon at four o'clock was taken with a severe attack of spasmodic croup. It lasted three or four hours, and then passed away; the child slept quietly all night. This had occurred for several days at this regular time every afternoon at nearly the very hour. The mental conditions of the child were entirely changed, which was especially marked after waking from sleep. It would cry on waking; it was extremely angry, and would strike or try to scratch the mother or attendant. I suggested to the attending physician that, on account of the mental symptoms and the marked four-o'clock afternoon aggravation, lycopodium seemed the remedy indicated. Now lycopodium has no croup symptoms, but no other remedy in the materia medica has in so marked a degree the mental symptoms on waking, and the 4 p. m. aggravation. There was no recurrence of a croup attack after a single dose of lycopodium in a high potency, and the temperament of the child became normal immediately. In this case the pathological condition, therefore, had nothing whatever to do with the selection of the remedy.

Colchicum IN TYPHOID.—Dr. J. R. Simson⁶⁶ reported this: A man of nervous temperament had a very severe attack of typhoid. He was very wild, could not sleep, imagined his left half belonged to some other person, animals after him, would spring out of bed to get away, etc. And one peculiar and characteristic symptom was that his left pupil was contracted so as to be almost imperceptible, while the right was dilated the full extent of the iris. I was giving him the

best indicated remedy I knew of. He had many symptoms which several remedies of the typhoid class have, except the eyes. I searched for days for a remedy with that symptom, and finally found it in the symptomatic indications of "Panelli on Typhoid Fever." Contraction of left pupil with dilatation of the right (colchicum). I found further symptoms corresponding with this remedy. I gave him colchicum, and he became better immediately, and slept until late next morning, and when he awoke was on a fair way to recovery. Now I fail to find that symptom in any materia medica or repertory.

Arsenicum AND CANCER.—Dr. J. J. Thompson says:⁶⁷ It seems curious that after so many well-authenticated cases are brought to light, still there are learned men who say that cancer cannot be cured by the internal remedies. I have now under my care a lady who some eight years ago had her disease diagnosed by Professor Hobart of Chicago as cancer of the uterus. He called Dr. Charles Adams of the same place in consultation, who pronounced it cancer and advised operation, without, however, holding out a very substantial hope of cure, so the advice was not followed. She was then put on the opium treatment to relieve pain, and at the time of Dr. Hobart's death was taking an immense quantity of opium daily. To-day she is not taking any opium, seldom complains of pain, and eight years after the first diagnosis of cancer there is very little enlargement of the uterus. She was under Dr. Hobart for three years, and he gave her arsenicum. Since then I have occasionally given her the same remedy in the 3d to the 30th potency. She is well, and presents no symptoms of cancer. I believe there are many to-day who could tell of similar cases.

Phaseolus, THE HEART REMEDY.—Dr. S. R. Stone sends us yet another verification of phaseolus, as follows:

In answer to a rush call I found Mr. T., æt. sixty-nine, in a semi-conscious condition, yet evidently suffering severely. Respiration labored; pulse fifty-one. The family informed me that at the beginning of the attack he complained of distress in region of heart; also that heretofore, during similar though lighter attacks, the pulse had always been very slow.

Phaseolus 6x, a dose every thirty minutes for three doses, then every hour, was followed by marked improvement. He spent a comfortable night, and the pulse was nearly normal next day, when the patient informed me that he could "feel every dose" on the previous day.

The remedy was continued once daily for several weeks, and patient reported at my office occasionally with a heart acting very nicely. Time only will tell if it prevents subsequent attacks. I have not yet been disappointed in the action of this remedy, and consider it a valuable addition to our materia medica.

Tenaline.³⁷—Tenaline is a new preparation recently prepared from the areca nut, with the object of retaining the tœniifuge alkaloids of arecaine, arecaine, and guvaine, and getting rid as far as possible of the very toxic principle known as arecoline. F. Hobday has been able to observe its effects and test its efficacy in rather more than sixty cases of animals, and concludes that tenaline is certainly of great value as a vermifuge, especially for tapeworms, in the dog and cat. It has the advantage over powdered areca nut of being much easier to administer, as its bulk is small, and a purgative is not a necessary adjunct. Its effect on ascarides is also well marked, as they may either be vomited up from the stomach or expelled in the fæces. Its action on the bowels is to increase secretion and stimulate peristalsis, so that even if no worms be present an animal which has received a full dose passes liquid evacuations. Above all, its general effect seems invariably to be to cause expulsion of the head as well as the segments, thus getting rid of the most troublesome part of the parasite. With reference to dose, that recommended is an allowance of 1 minim for each pound of body weight, and it is also advised that it should be administered pure, or with the addition of a little water. The latter was found to give the best results, the addition being made of an equal amount or rather more. That the results are better when water is added, especially where small doses of the medicine are prescribed, may be explained by the fact of its being necessary to give a sufficient quantity of fluid to reach and come in direct contact with the worm which is lying in the intestine. The dose mentioned may be

doubled with safety. The tenaline is, however, toxic, for a dram killed a terrier weighing four pounds. It is unsuitable for subcutaneous use.

Atropine Poisoning.—Dr Curtiss Ginn³⁸ removed severe cataract from William D., aged sixty-seven. He was subject to so-called "bilious" attacks and used to outdoor life. Nausea and violent vomiting promptly followed the extraction, causing some prolapse of the iris and a subsequent iritis of a mild character.

A few drops of a four grain to the ounce solution of atropia was dropped in the eye. In the course of an hour an acute, violent delirium made its appearance, accompanied by great dryness of the throat, constant urging to urinate, and headache. His tongue also became so dry and clumsy that distinct articulation was impossible.

This condition began to leave him in four or five hours, but recurred when the dose was repeated in the evening. This time the action began to pass away in six hours, and the next morning the patient was mentally normal, with, however, no recollection of his actions or feelings the previous evening.

The druggist had given a four per cent. solution, instead of a four grain to the ounce, as ordered.

Arsenic, its Physiological Action.—Byrom Bramwell³⁹ observed a case of pernicious anæmia in which there developed an herpetic eruption on the forehead during the arsenical treatment. Mr. Jonathan Hutchinson has directed attention to the fact that herpes zoster is in some cases apparently the result of arsenic.

The author calls attention to the great interest of this case, especially when it is remembered that arsenic is a specific in many cases of recurring herpes of the vulva and in pemphigus.

Schirler mentions the case of a fifteen-year-old child of a distinctly neuropathic tendency, with a history of articular rheumatism, who was suffering from chorea minor, the spasm involving the left sterno-mastoid and splenius capitis. Ascending doses of Fowler's solution were ordered until very large doses were taken. At the end of thirty-two days as much as 2 drams had been ingested, when the patient developed herpes nasalis, and, a day later, a chill and high

fever with herpes labialis, and laryngealis and paræsthesia of one side of the head.

Primula Obconica Proving.—Dr. E. V. Ross collates the symptoms of skin eruptions produced by this primula as found in various journals (among them the AMERICAN HOMEOPATHIST, 1897, page 429). He arrives at the following conclusions :

From symptoms Nos. 5, 6, 7, 8, 14, 15, 23, it would appear the time of aggravation is at night, and the most prominent sensation is itching and less prominent is burning. This is characteristic of the arsenicum eruption, also of anacardium, rhus tox., and some others. The eruption also bears a strong resemblance to these remedies, and, if one may judge from the symptoms enumerated, ought to prove a potent rival in erysipelas and eczematous complaints. Rhus poisoning will no doubt find a new and efficient remedy in primula, and here let me state our experience in the treatment of the latter's complaint. It has been our fortune to see and treat a number of these cases. Rhus radicans (500) is our chief reliance, and in majority of cases it has proved all-sufficient, its action being prompt and decided. Where there was deep infiltration of the tissues, giving the integuments a board-like feel, and accompanying the inflammation and swelling from the start, or remaining after the more acute symptoms have subsided, anacardium orient. 500 and 47m has rendered us excellent service. When the eruption is pustular, and the pustules coalesce, forming thick scabs or crusts, we prefer ledum pal. 500 (Tafel) and 1000 (Skinner). In a few cases we have been compelled to resort to other remedies, but the majority of poisonings from ivy can be promptly antidoted by these three remedies.

Further information regarding this drug is desired.

Rhus Tox. Indications.—Dr. Goullon reports with interesting comments the case of Miss L., who had been nursing a patient for weeks and was attacked by a catarrh of the intestines and stomach ; we shall not here decide whether this was caused by a cold or by a mistake in diet ; at the same time her whole nervous system was severely affected.

Having been before inclined to constipation, now at every slight provocation she would have

diarrhea, e. g., when she intended to take a little trip. She herself gives the following account of her state : "Severe distention of the abdomen (her dress had to be let out almost a hand-breadth). Dyspnœa, especially in the morning and at the slightest exertion. In company she experienced fearful anxiety and restlessness, so that she could not retain her seat. Diarrhea, or at least very soft stools ; after the stools a feeling of great weakness in the back or in the small of the back, so that she had to walk stooping forward, and out of breath, and had to rest for a long time. Also, in walking in the open air there was great weakness of the back, so that she could only walk slowly for half an hour, stooping forward. In the morning a slimy taste in the mouth. The appetite was otherwise good." Calcareo carb given in the morning, at noon, and at night produced improvement, but after one or two days there were frequent slight relapses. Finally, only rhus tox. 6, three times a day, removed all the symptoms.

The patient decidedly gave the preference to rhus, as having been of the greater service ; also the great nervousness, the soft stools in the morning, and the weakness of the back are rhus symptoms. More rarely is there found in it the attendant dyspnœa ; this is more frequently found as an anæmic or calcarea symptom. The same may be said of the slimy taste, or the attendant symptoms of catarrh of the stomach, to which was added also a long-continued bitter taste.

Internal Medication for Ivy Poisoning.—Dr. F. Mortimer Lawrence comments on the discovery of a recent writer that a case of ivy poisoning would have fared better had no external measures been employed. He says :

"The writer, long having been a sufferer from this form of dermatitis, has tried everything in the category, from the mildest domestic lotions to strong solutions of nitrate of silver, and has learned from many annoying results to discard altogether the use of external agents and to rely wholly upon the most clearly indicated single homeopathic drug. In recent years the best results have been obtained from belladonna, cantharis, rhus venenata, and apis ; but the essential thought, no matter what the selected agent, is to give but one remedy at a time and

trust wholly to allaying inflammation by the action of the remedy administered internally. *Belladonna* acts promptly in suitable cases, quickly allaying intense inflammation. *Cantharis* and *rhus venenata* have been found most beneficial for the intolerable itching, while cases characterized by œdematous swelling, without great pain or itching, but with soreness or burning, are helped by *apis*. *Mercurius sublim.*, *sepia*, and a few other remedies are occasionally indicated also. Large personal and professional experience has led to discarding all external applications, except pure olive oil to protect the skin from air and moisture."

Antimonium Crud. 3x IN BRONCHO-PNEUMONIA.—Dr. Leonard.—Child, æt. eighteen months, was brought to my office to see if I could not fix its rupture, that had been keeping it sick for nearly two weeks. On examining a slight umbilical protrusion I discovered that the temperature in the axilla was $103\frac{1}{2}^{\circ}$, and that it was suffering from broncho-pneumonia. Sounds could be heard all over the chest. Child was hardly able to sit up, and too sick to show its mentality. The first prescription was ineffective, and the next day the lungs were unchanged. Temperature one-half a degree lower. Very cross and irascible, and would not sleep unless rocked. Gave *chamomilla* 6x, but on succeeding afternoon found patient about the same, but had slept quietly all night. Fever had returned about noon. Temperature at 4 P. M. was $102\frac{1}{2}^{\circ}$. We had to take it by main force and agility. While studying *cham.*, *cina.*, *ant. crud.*, *ant. tart.*, *bry.*, and *nux.*, a neighbor remarked, "Why, that baby won't let me even look at it; when I look up it jerks its head the other way." That settled it; I then gave *ant. cr.* Clinical symptoms: child cannot bear to be looked at; extreme irritability and fretfulness. Remarks: a powder every two hours when awake. Improvement immediate and convalescent two days later.

Pulsatilla IN PUERPERAL MANIA.—Dr. W. M. Follet treated Mrs. L., aged twenty-seven, blue eyes, brown hair, stout but flabby. Family history of insanity. First pregnancy passed through the gestative state without having a symptom. Delivered March 25, 1897. Labor normal and recovery prompt. April 18, 1897,

patient's husband called at my office, and stated that his wife acted "queer" and had sleepless nights. On calling at the patient's home she at first refused to see me, but my excuse being to see the baby readily granted my request. Patient not inclined to be communicative. Whole personal appearance had changed; formerly very particular as to personal appearance, now just the opposite; sad, staring look; sat continually looking out of her window. This was all that could be learned at this visit. The following two days sufficed to develop the real picture of the disease. Full of anxiety as to the future of herself and baby. Continually moaning: "Poor baby! Poor baby! What will become of him!" Does not want to see anyone. Weeps over her condition; "going to be a burden to her family." Wants to kill herself and baby. Sleepless at night—all symptoms < at night.

Lochia slightly tinged with blood.

Puls. was the first remedy prescribed, but on reviewing the symptoms carefully, the merest tyro could not doubt the remedy: one dose of the 200th cured in ten days.

Euphrasia IN VOMITING FROM HAWKING MUCUS.—A. B. Eadie.—A few years ago I was applied to by a patient who suffered from vomiting his breakfast, caused by attempting to clear his throat of an offensive catarrhal mucus. I made a number of prescriptions that did little but palliate, and finally for some intercurrent malady gave him *euphrasia* 2c. He returned after a few days to say "that the medicine cured him of vomiting his breakfast." This fall I had a patient who complained that every morning on his way to work he vomited his breakfast on clearing his throat of an offensive phlegm. He suffered all last winter from the same trouble, and now it had come on again. *Euphrasia* 2c. removed the trouble at once, and he has been free for about a month.

Phosphorus IN SEPTIC PERITONITIS.—Dr. Howard Crutcher "narrates graphically the case of a girl of sixteen attacked by perforating appendicitis. Her friends refused operation until the case was desperate, and then demanded it when the surgeon's judgment foresaw a fatal termination. Yielding to the clamors, the operation was performed, in the course of which a large abscess

belong to the colon freely contaminated the general peritoneal cavity. Prolonged flushing and drainage completed the operation.

The doctor continues: "Up to the fourth night the progress of the case was far more favorable than I had dared to hope it would be. About the beginning of the fifth day the crisis came with a vengeance. The pulse was 130, the mind was wandering, the urine and feces passed without restraint, and it was very evident that the girl was rapidly sinking. Arsenic was given repeatedly, but without avail. I sent a message to the students who were nursing the case, to the effect that death was inevitable, but that a hot saline enema might prolong life.

"On attempting to give the enema the rectum was found to be open, and no resistance whatever was offered by the sphincter ani. Grayish-white fecal discharges, watery and offensive, passed constantly. The students recognized the indications for phosphorus, gave a dose of that remedy, and, instead of dying, the girl got well."

Dr. Crutcher concludes with earnest references to the conclusive evidence of the amazing value of rational therapeutics in desperate surgical cases.

Duboisin 3 IN HYPERTROPHY OF OPTIC NERVE.—Dr. C. H. Hellrich² states that Mrs. E. W., aged twenty-one, applied for treatment at his clinic at the New York Ophthalmic Hospital on March 23, 1897. Examination revealed a low degree of hyperopic astigmatism, which was corrected with a + 0.25 D. cyl. axis 90°, and a hyperæmia of the right optic nerve. Pathogenetic symptoms: Optic nerve red, and its outlines indistinct. Retinal veins tortuous and enlarged. Accommodative asthenopia. Clinical symptoms: The appearance of a red object in the field of vision which moved with the movements of the eye. Remarks: Duboisin 3 was prescribed every three hours and the proper glasses ordered. On her next visit, April 8, she was completely cured, and the nerve appeared normal. Attention is called to the disappearance of the symptom, "the floating red spot."

Kalmia Lat 30c. IN NEURALGIA OF A STUMP.—Dr. A. Von der Lubbe³ narrates this interesting case: A gentleman, during our late war, was so badly wounded in the upper arm of the left side that it was necessary to amputate it five inches from the shoulder. For many years, at times, he

has suffered from neuralgia in the stump. Several operations were performed on the stump and the enlarged ends of the nerves removed. This would relieve him for a while, but then the attacks would be just as severe. He dreaded another operation. At my advice he tried homeopathy. I gave him *hypericum* 30th at first; this had no effect. Then, knowing he had a tobacco heart from excessive smoking, also that the pains would extend over the whole stump and into the muscles of the left chest, I gave him *kalmia lat.* 30c. This gave him prompt relief, so when he has an attack his wife always gives him three or four doses in a day, and he has immediate relief. The attacks are less frequent. This has been used for over two years, and never failed.

Stramonium IN INCIPIENT INSANITY.—Dr. J. M. Selfridge⁴ treated a young woman of thirty, who was beginning to lose her mental balance. A hereditary taint, a love affair, and spiritualistic séances were ætiological factors.

She was possessed of the hallucination that her grandmother, long since dead, was talking in her ears, and directing her as to what she should do and where she should go, etc. In the night she could not sleep because she heard voices in her ears. She neglects her household duties, and music, of which she is very fond. (She is a splendid performer on the piano.) She cannot sleep, does not want to be alone, and must have a light in her room all night. There is loss of appetite, and she is careless about her personal appearance.

The hallucination, "she hears voices in her ears," was found under *stramonium* alone, and it was given in the 200th. In five days she was much better, and in six weeks was nearly well. Since then she has had no return of her trouble, but prefers a light in her room from old habit.

Xanthoxylum Fraxineum 30 IN DYSMENORRHEA.—Dr. Martin Deschere⁵ reports the case of Elsa N., aged nineteen: Menstrual pain before and after flow. The pains start in the hypogastrium and shoot down the thighs. Sick headache, with nausea and vomiting. The menses are profuse and always late, but preceded and followed by a milky leucorrhœa. The blood is offensive. The patient is of a very hysterical and hyperæsthetic nature. Pathogenetic symptoms: Menses profuse and too early. Cutting

pains; sudden pains in right ovarian region, extending down thigh and passing over to left side. Leucorrhœa, white, milky, after menses. Shooting pains from region of right ovary to hip and back, with gushing, milk-white leucorrhœa ceasing suddenly. During menses, which are too early and painful, cramp-like pain in head and abdomen; hungry, but food nauseated; when vomiting the stomach felt as if rising and falling. Clinical symptoms: Neuralgic dysmenorrhœa, pains going down the anterior portion of the thigh, mostly left side. Neuralgic dysmenorrhœa, with neuralgic headaches. Remarks: A powder every night and morning, to begin two weeks before menstruation is expected. The next period set in prematurely, at the time when the leucorrhœa used to appear, but painless. There was still headache, but the blood was not offensive. The prescription was repeated. The following periods were normal. Headache only occasionally, but no more vomiting.

Natrum Sulph. 30 IN PANARITIUM.—Dr. Deschere²⁰ also tells of a chambermaid, aged twenty-one years, who had a panaritium on the first finger of her right hand, about six months ago, which suppurated and caused much suffering at that time, making her unfit to do any work for ten days. Now the left index finger is affected in same way. Whole of second and third phalanges was swollen and deep red. Pain was severe, and she had passed a sleepless night with fever. There was no fluctuation, and I told her I would try and stop the trouble right there. Pathogenetic symptoms: Sticking ulcerative pains under nail of right index finger, and similar pains in the phalanges of various fingers. Pulsation in tip of little finger, etc. Clinical symptoms (Allen): Panaritium, the pain is better out of doors. Remarks: In watery solution, a teaspoonful every two hours. After two days she came in smiling, the pain having ceased rapidly, and the swelling had commenced to decrease. After two more days the finger was well.

Nux Moschata IN PROLAPSUS UTERI.—Dr. Neatby.⁷—Mrs. G., æt. thirty. Has suffered for many years from "prolapsus uteri." The trouble is constantly brought on by exertion even of trifling character. A comparatively short walk is enough to cause a "descent of the

womb." She had worn two ring pessaries, but had discontinued their use as she was unable to retain them. They came out with every motion. She suffers from constant pain in the back below the waist, and from a dragging pain from the shoulders downward. The pain is worse just before each period, but there is no pain during the period. She has no bearing-down sensation. The period is sometimes seven days too soon, and sometimes fourteen days too late, and is occasionally profuse. She frequently has a troublesome leucorrhœa for a week before the period. There is an occasional headache right through the temples, just anterior to the ears. She complains also of pain at the back of the neck. She sleeps well, but gets drowsy by about 9 P. M. She has long suffered from palpitation, which is worse on exertion or on going to bed. There are no dyspeptic symptoms, no "globus" or faintness, but sometimes numbness of fingers.

Nux moschata 4x, m. iii. ter. Ten days later reported. Altogether much better. Feels very little of the pains in the back, and nothing of the pain in the neck. Has entirely lost the nervous, restless feeling she had. Has much less palpitation but still some headache. The leucorrhœa has disappeared. There has been no return of the prolapse, though the patient has frequently made such exertion as always formerly sufficed to bring it on. The last period came on prematurely.

July 27. One month later reports herself as better than she has been for a great many years. The leucorrhœa is better. She is free from the pain in the back and continues entirely free from the prolapse, though working harder than when she was constantly suffering from it.

No local treatment has been adopted in this case. There has been no change of air or rest of any kind. During the treatment the patient's circumstances have been getting more and more trying.

Iodide of Potash AS A DIAGNOSTIC MEASURE IN PULMONARY TUBERCULOSIS.^{37, 38}—Several years ago Dr. Stiker of the Faculty of Medicine of Geisen, Germany, announced that the iodide of potash, in a daily dose of $7\frac{1}{2}$ to 15 grains, in cases of suspected pulmonary tuber-

catarrhs, would give rise to a local catarrh in the diseased part and increased expectoration, in which the characteristic bacilli would be detected. Dr. Vetsiessen has also tried this method, administering to twenty-seven patients a 1.5 per cent. solution of the iodide, in doses of a teaspoonful, three times a day. In eight subjects he had positive results, for in two or three days the expectoration increased, together with the cough, and auscultation revealed sonorous rales in different parts of the lungs where no pathological signs had as yet been noticed. In four of these patients the tubercle-bacilli could be discovered; in the others, other signs, as enlarged glands and tubercular osseous lesions, facilitated diagnosis. The other nineteen presented no reaction in the lungs, and he considered them as non-tuberculous. For, indeed, in none were either the bacilli in the sputa, nor did tuberculin give a reaction. Therefore, he recommends this measure to physicians who have not the means at hand for a bacteriological examination of the sputa.

Some years ago there was reported, in a Russian journal, the case of a healthy young woman who immediately developed tuberculosis of the lungs, which ran a rapid course, after taking the iodide of ammonia.

Eucalyptus Globulus IN STRYCHNINE POISONING.¹¹—Dr. Monfrida Musmeci¹² has found that a decoction of the leaves of eucalyptus globulus and a solution of a salt of strychnine formed a flocculent precipitate of a clear color, a solution of citron-yellow tint remaining above, and the strychnine losing its bitter taste. This raised the question as to whether eucalyptus was an antidote for strychnine. The author carried out a number of experiments upon animals to ascertain what effects would be produced by giving these two drugs together, and what antidotal power eucalyptus would exert after the development of the symptoms of strychnine poisoning. He found that when these drugs were given simultaneously the animal survived, while, if the same amount of strychnine were given alone to an animal of the same kind and size, death would ensue.

In another set of experiments the eucalyptus was given after convulsions had appeared, and then these became much less marked, and even

disappeared. From these experiments the writer believes that eucalyptus has a real antidotal action, and that a practical application of it should be made by employing a decoction for washing out the stomach in such cases.

The Poison of the Honey-bee.—Dr. Langer¹³ has examined the poison of the honey-bee, in search for its active principle. He used in his investigations twenty-five thousand bees.

The freshly discharged drop of poison is transparent and colorless, of acid reaction and bitter taste, and has a fine aromatic odor, well brought out by rubbing it between the fingers. When dried at 212° F. there is left gummy residue. The specific gravity is 1.131. It is clearly soluble in water, but with alcohol it forms at first an emulsion, while continued action causes a granular precipitate.

Formic acid is readily shown to exist in the poison, but the real active principle is not this acid, but rather an organic base which in the free state is only soluble with difficulty in water, and is held in solution in the poison by means of an acid. The composition of the active principle was not determined, owing to scarcity of the material.

Kreosotum IN ECZEMA.—Dearborn of New York¹⁴ asserts that, while carbolic acid is the chief principle in kreosote, there is difference enough in the pathogenesis of the two drugs to give each a distinct place as a remedy. Kreosote disorders the blood, produces an irritant effect on the mucous membranes and the skin, which may thus cause local or general disturbances of nutrition, derangement of function, or inflammation of the surface tissues. Through its action on the nerve centers, a great variety of paræsthetic sensations may be felt.

On the skin it produces functional derangement of the sebaceous and sweat glands, a tendency to ecchymoses (from slight causes), papules, vesicles, fissures, scales, and crusts, persistent and unhealthy in character, sometimes degenerating into malignancy, with offensive secretions and, rarely, a gangrenous tendency. Sensations indicating kreosote are more often described as burning, itching, biting, stiffness, or tensive pain. The favorite locations for papular and scaly eruptions are the backs of the hands, the face, ears, back, and shoulders; for fissures,

the hands, and on or about the lips; while vesicles or wheals may occur at these points of selection or generally over the surface. The eruptions are worse, as a rule, at night in bed, from pressure of clothing, from friction, but may be relieved by scratching.

Papulo squamous or papulo-vesicular eczema of the dorsal surface of the fingers and hands, sometimes excited by repeated contact with irritating substances (trade eczemas), and obstinate in course, frequently present enough indications for kreosote to make it a curative remedy. Moist eczemas of the face or ears, with offensive secretions, burning and itching pains, worse at night, may be cured with this drug.

Hypericum IN TRAUMATIC NEURALGIA.—Dr. Von der Suhe.²⁶—A gentleman, while gunning in the neighborhood of Cooperstown of this State, was accidentally shot in the forearm of his left arm by a friend. The forearm was filled with a great number of bird-shot. He came home to Brooklyn and called on a surgeon, who treated him and removed all the shot he could, locating a number of them by the use of the X-rays. He suffered intense pain in the forearm and hand supplied by ulnar nerve. There was partial paralysis of hand. Outward applications were used, which gave him temporary relief for a few hours a day. Electricity was persistently used, but had no effect on pain or numbness of hand. There is no doubt the ulnar nerve was lacerated. After nine months he came under my treatment. Gave him *hypericum*, which gradually relieved him, and in three weeks was entirely cured of the traumatic neuralgia. Then gave him *lachesis 30* on disks to take four times a day for the numbness. At the end of a week reported improvement. Then I gave him seven powders of *lachesis 200*. Each powder to be dissolved in two tablespoonfuls of water; to be taken in two doses night and morning. This was two weeks ago. Last week took no medicine. The improvement in his hand has been remarkable. The numbness has nearly passed away from his hand. He could separate his fingers so that the tips of the fingers of his left hand could touch the tips of the fingers of his right hand, when separated. As long as there is improvement he will receive only placebos. His hand improved so much he

went away for a few days on a hunting trip. He was able to use his gun.

Epiphegus 30 IN HEADACHE.—Dr. A. Von der Suhe²³ cured the following cases: "Nearly eight years ago I was called to a young lady, who was suffering from a headache that was located in the occipital region. The pain extended from there over the top of the head toward the frontal region, the severest pain existing in the occipital region. These headaches would always come on after the excitement of shopping all day or after going to evening company. She would be compelled to go to bed, it made her very nervous, only slept part of the night, and that restless. Had very little appetite, and was accompanied by great nervous prostration. Gave above remedy and the headache was better after a few doses. The headache disappeared entirely in a few days. The prostration remaining was entirely relieved by *china m.* It was a complete cure, for she never suffered the same way. The second case was a young school teacher. For several months she would have a frontal headache, pains extending into the eyes; this was during the school session. After school the headache would gradually pass away. This would occur every school-day. Gave her *epiphegus 30* four times daily for a week. She has had no more headaches, and it is now over two months ago. The keynote of this remedy is this: headache brought on by a mental strain, whether shopping, visiting, or any other mental exertion, as teaching."

Selenium IN IMPOTENCY.—Dr. H. V. Halbert considers selenium effectual more upon the mental phase of the disease than upon the cord incontinence. It is applicable where lack of confidence is a factor; the condition due to a loss of brain control over the lower cord center. The resulting excesses produce debility and still further weaken the brain cells' power to give motor directions to the cord. The symptoms most prominent are forgetfulness in business, indolent and unreliable attention, insomnia, and finally mental inability, stammering and imperfect articulation. A further result is constipation, urinary incontinence, and impotence.

Mr. F., a young man of apparent good character, presented himself at my clinic for the cure of a condition generally defined by the

symptoms above. He had not practiced an unnatural lust, but admitted excesses in his earlier youth. His complaint was mostly of his mental incapacity, for his forgetfulness had increased so that he feared the loss of position. A prostatic discharge at stool had frightened him into the belief that it was a more vital loss, and, therefore, a drain upon his brain. The mental dulness he attributed to this, as is frequently the case. His face showed signs of emaciation though not of apprehension. He complained of exhaustion and a desire to sleep, particularly in the morning. Other signs of exhaustion were noticed by the cold, clammy sweat on the chest, axilla, and genital region. Selenium 3x was administered for several months, with occasional intermissions. The improvement is pronounced; the mental infirmity has disappeared and the physical defect has been corrected. He is strong and well, and, more than all, he is of value as a man.

Cimicifuga IN DELIRIUM OF TYPHOID FEVER.—Dr. M. A. Wesner²² reports this graphic case:

In January, 1894, I attended D. R., aged twenty-seven years, who was afflicted with typhoid fever. Prior to this attack he was on a prolonged spree, which he kept up three or four weeks, so that the fever was simply a transition from a continued debauch to the dreamy state incidental to this disease. It was a tumultuous case. He had delirium wild and sometimes determined, from the beginning. His temperature was 100°; had diarrhea, retention of urine, and many other untoward symptoms. At the end of four weeks he began to improve, although extremely emaciated. All the typhoid symptoms disappeared,—fever and all,—with the exception of the dry tongue, subsultus, and delirium with that extreme restlessness and constant wakefulness. For four days and nights he did not sleep five minutes at a time and that very seldom. He kept constantly talking and continually changing the subject, now of this, then of that, and again of something else. While lying on his back he would fall asleep, then raise his hand slowly and by the time it reached arm's length he was awake. This he repeated at least a hundred times with always the same result, and he never slept any longer.

After having a consultation in his case, and trying a number of remedies without apparent effect, on the fifth day after the fever left him my patient was given *cimicifuga* 6x in water, one dose every hour, with the most happy result. He took just three doses and then fell into a sound sleep which continued uninterruptedly not less than four hours to begin with, at the end of which time he awakened, got another dose of his medicine and slept again. His delirium soon began to grow milder and at the expiration of forty-eight hours, about three-fourths of which time he slept, it had entirely disappeared and he was perfectly rational. His tongue now became moist; in fact, all the various organs assumed their normal functions, and my patient went on to rapid recovery—all owing to the use of *cimicifuga*.

Ignatia AS AN EYE REMEDY.—Dr. Thorn²³ secured good results in the case of a woman who had suffered from sore eyes for about ten weeks. The allopathic treatment with atropin and eye-lotions has been altogether ineffectual. The patient is in despair. There is so great a sensitiveness to light and so severe a spasm of the lids that it is absolutely impossible to examine the eyes. Even the least ray of light is unbearable to the patient. Out of the closed eyes there issue at times sharp tears. Now and then certain muscles of the face twitch. There are fiery zigzags before the eyes. Since her eyes are sore the patient is also afflicted with noises in the ears, which she describes "like the chirping of grasshoppers." The patient cannot remain quiet in one position, even for a moment, while consulting me, but has continually to move her body hither and thither, which gives her some relief. She suffers from nervousness of a high degree, and in consequence of unfavorable family relations she has to bear much grief and sorrow, which she has to suppress. With especial regard to the mental state and the nervousness of the patient, I ordered *ignatia* 4, which has, indeed, a great number of symptoms referring to the eyes, but nevertheless belongs to the eye remedies which are rarely used. The success was surprising. Eight days after beginning the cure the patient, as she communicated to me in writing, was already able to take part in the preparation for Christmas.

Strychnine Poisoning.—Dr. A. Hubel³⁷ reports that two hours after intestinal ingestion of this drug he thoroughly washed out the stomach, gave strong coffee and ten drops of tincture of iodine every two hours. Later he administered seventy-five grains of potassium bromide. Recovery followed. The notable conditions, aside from the usual symptoms, were in this instance the elevation of temperature on the first day, the retention of urine, and the appearance of blood and casts in it. The first is explained by the enormous activity of the muscles; the urinary retention by the spasm of the sphincter vesicæ. The blood and casts can be explained by the irritation which strychnine in large doses produces in the kidney. During convalescence the influence of strychnine upon metabolism was marked in that the chlorides and phosphates were markedly diminished at the commencement, but increased daily in amount, while the urea remained constant as in normal urine.

Some Effects of Cannabis Indica in Large Dose.—D. Robert C. Bicknell³⁸ regards as worthy of note the existence of muscular contractions, followed later by convulsive movements, evidently due to action of the drug on the spinal cord. Aside from acceleration of the pulse-rate and a feeling of fullness in the artery at the wrist, there was, just previous to the occurrence of unconsciousness, a sense of extreme tension in the abdominal blood vessels; they felt distended almost to bursting. After some hours the urine was markedly increased in quantity. No constipation resulted. There was no foreboding nor fear of impending death.

Partial Proving of Euonymus.¹⁸—The drug was prepared from the fresh wahoo root, dug in Washtenaw County, Michigan. The subject was a male, twenty-four years old, of nervous temperament, strictly temperate, did not use tea, coffee, tobacco, always ate plain food; healthy; had no idea of the nature of the drug he was taking; was required to report whenever anything that seemed a symptom developed. Began with a drop of the tincture, the dilution being changed from time to time until the fourth was given. Time of taking medicine, three weeks every two hours every day. Some of the most prominent symptoms were de-

veloped after discontinuing the drug. The notes are in the prover's own words: "Felt elegantly for about a week, then began to feel tired generally. Bowels a little lax. Have had to 'brace up' to keep a-going. Sleep not good. Restless first part of night, wake up early in morning. Pain over the liver. Pain in right lung. Was accused of being drunk on the street. Stomach feels 'off' with nausea and flatulence. Worse evenings. Headache over and around eyes. Heart has been sensitive. Palpitation when running up and down stairs. Did not go to sleep for two hours. Was restless, could not sleep. Have been so thick-headed for a week that could not study. Slow in getting senses together. Have to think and think to answer a simple question. Some days after stopping medicine thought liver was enlarged; had that sensation. Region of liver was tender." (Note by observer: One night came to house and called me up; he was alarmed because of the sensations just given. Was sure he had "some liver disease." This is significant, for the prover had had no suggestions as to what symptoms he might experience or what the drug might be like in its action.) "Belched gas in small quantities with the flatulence not relieved. Was constipated for some time after the second day of stopping. Was not able to study for two week after stopping the medicine."

Xanthoxylum IN UTERINE FIBROID.—Dr. P. C. Majumdar³⁹ was called to see a woman of fifty-six suffering from uterine tumor, for whom an operation had been advised. She was emaciated, feeble, and wrinkled, with poor appetite and disgust for food. The climacteric occurred at forty-one years, before which she always had profuse, early, and painful menstruation, preceded and followed by leucorrhœa. She was nervous, depressed, and always lazy and sleepy—even in daytime. There were neuralgic pains in the right ovarian region. The tumor, the size of a small orange, was hard and movable. She had pain on deep pressure over it, and an offensive yellowish white discharge from the genitals. *Xanthoxylum* 3x was prescribed, given morning and evening.

After a week pain was less, discharge less and of not so bad an odor, and the appetite improved. In two weeks more the tumor was

fall to original size, and the patient a changed woman. The remedy was given now and then for six months, when the tumor and concomitant ills were gone. Two years later she was still free from complaint.

Rhinoscleroma Cured by Auronatum Chloratum 5x.—Dr. Kranz-Busch¹⁸ reports the cure of this "incurable" (?) and dangerous disease. The patient first noticed the disease when three months pregnant, at the age of twenty-three. There had been no syphilitic taint. In the autumn of 1887 there appeared a slowly increasing darkness and discoloration of the right upper side of the nose, about the size of a threepenny bit, and a few weeks later a similar swelling on both alæ nasi. The medicines prescribed did no good. The shape of the nose became much altered, its point became flattened, the alæ broad and immovable; on the left surface of the septum there was a copper-colored hard lump which interfered with breathing. This was scraped off with a spoon and then burnt with lactic acid. This operation only gave temporary relief. On the upper lateral aspect of the nose, on the alæ nasi and septum, there are copper-colored, elastic, shining indurations. The skin around is normal in appearance. The lumps can be moved along with the skin; they are quite painless even when pressed strongly. There is no appearance of inflammatory action. The nose is flattened. The patient has a nasal tone of voice, the left nostril is much narrowed. When cut or pressed with knife or scissors there is no reaction; the wounds heal readily. The patient is otherwise well; nurses her baby. The treatment was strong doses of pot. iod. for a long time, an ointment of galls, and curetting, all without any benefit. The disease began, as before said, in the third month of the first pregnancy, and increased during the pregnancy. After delivery the lumps became somewhat smaller. In the second pregnancy the disease increased. The nose became larger, reddish-brown or purple, and a number of smaller lumps the size of sago came in addition to the larger lumps. After delivery the disease ceased to increase, but did not diminish. In 1891 she again became pregnant. Then the disease involved the left cheek. Post-partum the dis-

ease came to a standstill; but the patient's face was so disfigured that she would not venture out of the house by day. In 1893 she came under the treatment of Dr. Kranz, senior, after which the disease did not increase, although she became pregnant for the fourth time. The disease now began to diminish, and two subsequent pregnancies in 1892 and 1895 caused no relapse. Dr. Kranz's treatment consisted of repeated doses of auronatum chloratum 5x. This treatment was continued by his son, Dr. Kranz-Busch, until at length a perfect cure was effected, and the nose and features resumed their normal appearance. The lumps gradually disappeared together with the discoloration, the nose became of its original shape, and the nasal passages free from all obstruction.

Verbena Hastata in Epilepsy.—Dr. J. N. White¹⁹ treated a boy of five for epilepsy developed during whooping-cough. For five months sulfonal controlled the paroxysms, which occurred without it several times a day. Meanwhile, bromides, purges, oxide of zinc, and other allopathic remedies were given with no permanent effect. Finally Dr. White stopped the sulfonal and put him on verbena hastata, 12 minims every four hours, omitting the midnight dose. From first dose of verbena hastata the boy began to improve. He would have contractions of the muscles of the arms and legs and look wild for a minute or more for the first week, but after that he never had another symptom. We kept him on the medicine, as above, for six weeks, and now he takes 12 drops three times a day.

He has not had any symptom in over two months, and all that wild vacant look is gone; and he plays, eats, sleeps, etc., as if he had never been troubled with epilepsy.

A Nitric Acid Case.—Dr. Mohr:²⁰ "This was a man who had a great deal of trouble with vomiting and constipation, with occasional attacks of diarrhea and some hemorrhage from the bowels. He was treated for some months for gastralgia; he was treated for some years for constipation, and occasionally he was treated for diarrhea, particularly when it was associated with hemorrhage and led to considerable depletion; but, unfortunately, this man had never been examined physically, and I was astonished at that, because he had such violent pains in the

region of the stomach and the hepatic region. An examination revealed a cancer of the liver. He did suffer the tortures of the damned with that stomach and liver; he could not sleep, he could not take nourishment without causing a great deal of pain; and mostly followed by vomiting, so that he became very much emaciated and anæmic. I will tell you what nitric acid in the third decimal dilution did. It stopped his pain in the liver and stomach, it stopped his vomiting, it stopped his constipation, he had movements from the bowels every few days, quite well-formed, and that man absolutely died of a cancer cachexia, without suffering one hour's pain after he got that nitric acid."

Senecio Aureus IN PUERPERAL MANIA.—Dr. Selden H. Talcott⁹ reported a case of insanity promptly relieved by this drug, seldom used for mental cases. The patient was a female; age, twenty-six; married, two children; was admitted to the Middletown State Homeopathic Hospital, June 17, 1896. This patient had worried over the possibility of her child being stillborn, and nine days after it was born, strong and healthy, she was admitted to the hospital in a condition of violent acute mania. Intense mental excitement continued for three months, relieved in no respect by the usual remedies. The bodily temperature remained high; the patient was very active physically, and the mental state was that of a wild, violent, and almost uncontrollable person. We ascertained at last that the lochia had subsided suddenly after childbirth, and that the menstrual flux had failed to appear. On account of the amenorrhœa, coupled with a continued mental excitement, severe pain in the head, great nervous irritability and sleeplessness, and hysterical erethism, we gave her *senecio aureus* in the third decimal dilution, drop doses every two hours. She took the first dose of *senecio* on the 15th day of September. In less than three days she was improved, and on the 21st the record states that she "seems more quiet and rational than at any time." On the 24th the case-book shows that she is "improving every day." On the 26th "appears more rational; sleeps well." She menstruated in October for the first time in several months. On the 20th of October she seemed to be free from delusions and well-

balanced in mind, but was not very strong in body. She made slow progress in the line of physical recuperation, and, though fat and healthy in appearance, she showed for weeks great weakness of the entire bodily system, as is usual in such cases.

A parole was followed shortly by a relapse for which *senecio aureus* was again given, after *belladonna* had been only partially successful. From this time she improved rapidly, both physically and mentally. She menstruated naturally, and all the physical and mental functions were again performed in a normal manner. The patient was allowed to return to her home on the 15th day of February, 1897 (on a thirty days' parole), and was discharged recovered, March 17, 1897. Since that time she has remained in good health, both physically and mentally.

While the proving of *senecio* is not very elaborate, and while there are but few mental symptoms recorded, we find enough to lead us sometimes to the use of this drug. It seems to have a place of action midway between the fierce, hot, pugilistic mental state of *belladonna*, and the mild, tearful, and changeable condition of *pulsatilla*. Recovery from puerperal mania is seldom effected unless the menstrual function is re-established, and in attaining this desirable end the efficacy of *senecio aureus* may be more fully recognized in the future.

Crocus Sat. IN INSANITY.—Dr. E. T. Adams¹ of Toronto was persuaded to undertake the treatment by correspondence of Miss McS., aged twenty-seven, a school-teacher. Mental trouble, of five years' standing, had resisted all treatment her friends could secure. (She lived in a newly settled country.) Her condition varied between idiocy and attacks of acute mania, in which she several times injured herself and, on two occasions, her guardians.

"I undertook the case and never had more difficulty in obtaining information on which to prescribe. Finally I sent her a dose of *nux vom.*^{2c} (K) and *sac lac.*, in quantity sufficient. This benefited her general health to some extent, and so she went on for weeks; I trying to get the required information, they trying to send it, and both failing. Finally, when on the point of confessing that I could do nothing further,

the sister who acted as my correspondent mentioned that the patient's menstrual flow was black and stringy; a ray of light, but not enough to warrant a prescription. So I wrote inquiring as to the effect music had on the patient. The reply was a fragmentary proving of *crocus sat.*, that she would, when in her quiet, stupid state, sing or croon to herself by the hour; that singing exerted more control over her than anything else, even when wild and dangerous. Often in the middle of the night she would sing so loudly as to wake the family; then she never heard singing but she would start and join or else go it alone in opposition, according to the state she was in. Eureka! I exclaimed and sent her a dose of *crocus sat.*^{cm} (F. K.).

"Every two weeks I had a report and each better than the last, first becoming more gentle, then outbursts less violent and less frequent, then beginning to take interest in visitors. Next, began to join in conversation and show that she understood and appreciated the subjects spoken of; and so it went on until, in about three months, she was herself again—an object of wonder to all who saw or knew of her. This was about eight months ago; there has never been the slightest relapse, she is well mentally and physically, she enjoys life and is a subject for rejoicing to all who come in contact with her. The last complaint I had was that it was impossible to keep her from working, but in reply to question as to its effect on her, they write that she enjoys it and it agrees with her. Under these conditions I advised that they let her work. After the summer holidays she returns to her school-teaching."

Iris Versicolor 2x IN DIABETES MELLITUS.—Dr. E. Biruch:²—Mr. J. B., age thirty-six years, single, merchant. Duration several years. Pathogenetic symptoms: Mind low-spirited, dullness of mental faculties. Dull, throbbing supra-orbital pains, chiefly on the right side, with nausea, sometimes vomiting in the morning. Eructations, anorexia, urine pale and copious. Clinical symptoms: Burning in the pancreas. Urine of increased specific gravity and containing sugar. Feeling of tiredness and exhaustion and weakness of lower limbs. Remarks: Treated by various physicians. Pronounced hopeless by last medi-

cal adviser. Symptoms began to disappear and sugar to decrease within the first week. After suspending the remedy for two weeks the symptoms and sugar began to reappear. Disappeared again on re-administration of drug, which was continued for eight weeks. Ten months have since elapsed without the slightest observation of diet, and no symptoms have returned.

Arsenicum^{cm} FOR ASTHMA.—Dr. W. W. Gleason:⁴—Nineteen years' duration. She has for many years smoked and inhaled every quack nostrum to be obtained. Asthma is brought on by raising arms above head, or by physical exertion. Has not missed having asthma a single night for years. Sour taste in mouth. Lips blue, dry. Mouth dry. Severe cough, expectoration being white, frothy. Wakes after an hour's sleep at night with asthma. Constipation so severe has not had operation of bowels for ten years without physic. Fæces in small jagged lumps. Urging constantly day and night to urinate, must strain to pass urine. After voiding urine sensation as if some remained in passage, which causes tenesmus. Circumscribed redness of cheeks. Aching in forehead in afternoon and night. Darting pains as if needles in eyeballs. Darting pains through right chest on drawing a deep breath. Tired, weary all time. November 12, 1897, she received two powders of *arsen.*^{cm} and improvement commenced, no more medicine being needed. She has had no more asthma.

Oxalic Acid on Corks.—The following item³⁷ suggests the importance to a homeopath of securing properly treated corks for his potencies:

O. Wentzky states that recently he detected the presence of quite an appreciable quantity of oxalic acid on a lot of corks just received by him. On inquiring of the manufacturers as to the cause of the presence of this acid he was informed that its use in the manufacture of corks was quite common, and that the excess noted in this particular lot was due to the fact that the workman had used an excess of oxalic acid. The same author had observed the presence of oxalic acid in corks coming from another manufacturer, although in this case the quantity was not so large. It is stated that the acid is used to free the cork from tannate

of iron, which is formed by treating the corks with ferrous sulphate for the purpose of removing the excess of tannin on their surface.

Acetate of Thallium IN THE NOCTURNAL SWEATS OF PHTHISIS.³⁷—At the meeting of the Academy of Medicine held on February 22, Professor Combemale of Lille mentioned that he had administered this drug in the form of pills of 10 centigrams in cases of excessive sweating. In thirty patients, either tuberculous or affected with some other disease, who suffered from profuse nocturnal sweats, one only was not at all benefited and one other was slightly relieved without being completely cured. Those patients who suffered from large cavities and were very cachectic were most benefited, for contrary to other antisudorifics the acetate of thallium produces its greatest effect in very cachectic patients, and those suffering from leucocythæmia are also much benefited. In old cases of tubercle which are drying up, or in those in which softening is just beginning, the drug has not the least effect. Old cases of bronchial dilatation and of chronic bronchitis, which suffer from sweating as much as tuberculous patients do, also derive benefit from the acetate of thallium. The daily dose is from 10 centigrams up to, in some cases, 20 centigrams. It must not be given for more than four days in succession, for its effects are very lasting and persist for from eight to ten days, but refractory cases show no improvement even after eight days. The drug ought to be given about an hour before the time when the profuse sweating generally begins. In three cases complete alopecia followed the use of the drug. In from two to eight days the patients lost all their hair, but it is to be remembered that they had already begun to lose their hair and had taken from 80 to 110 centigrams of acetate of thallium in the course of a month. On the other hand, tuberculous patients under the same conditions whose sweating had been arrested by two doses did not suffer from this sudden loss of hair. Professor Combemale concluded that this accident need not be feared except after prolonged use of the drug or too frequent doses.

Carbolic Acid IN TYPHOID FEVER.—Dr. Gerald Williams³⁷ of Vernon, British Columbia,

makes the following report, in which a dose of carbolic acid, of decidedly unhomeopathic proportions, apparently cured a case of typhoid :

Last autumn I attended a case of typhoid fever—a typical case with rash, hemorrhages, and diarrhea. The patient recovered in twenty-seven days. Ten days after the temperature had been normal both morning and evening he relapsed. His temperature at the end of the first week was 106° F. in the evening for two days. He had two hemorrhages and distressing diarrhea. On the fourteenth day of the relapse I saw him at 9 p. m., and as the diarrhea was excessive I prescribed for him accordingly. The temperature was then 104.5°; the pulse was 90. At midnight his brother, who was nursing him, came for me in a great hurry. He told me that he had given him two tablespoonfuls of pure carbolic acid in mistake for the diarrhea mixture. I hurried as quickly as possible to his house. Fifteen minutes must have elapsed from the time of taking the poison to my arrival. I took a quart of saccharate of lime and my bag with a few drugs. When I arrived the patient was trying to vomit by putting his fist down his throat, but as yet had not succeeded; before I arrived he had “drunk about a quart of milk.” He was very much frightened, his mouth was terribly burnt, his lips were perfectly white, and he complained of great pain in the stomach; he was not at all collapsed. I made him drink a quart of saccharate of lime and administered one-tenth of a grain of apomorphine hypodermically. He vomited in about one minute. I then gave him salad oil and sulphate of soda. He vomited several times more, the vomited matter on the last occasion being almost free from the smell of carbolic acid. He then fell back in bed completely collapsed. The pulse was hard to find and respiration was labored. I injected brandy and ether sulphureous hypodermically. He was quickly recovered; in two hours from the time I arrived I left him. I saw him at 8 A. M. next morning, and was very much surprised to find him looking and feeling very much better than before he took the acid. He only complained of his throat and slight pain in his stomach. His temperature was normal. The pulse was 96. He never had any return of fever, and in

a week was out of bed. When his mouth healed he had nothing to complain of at all. In my mind this is a clear case of cure by carbolic acid, but I should not care to try quite such a big dose.

Lilium tig. m. in Dysmenorrhea.

Dr. Malcolm Dills¹ treated last fall a lady aged thirty-seven years, weight two hundred and twenty-five pounds, married six years, four years ago gave birth to a child, still-born, shortly after this began to feel bad, as she expressed it, menstrual period every three weeks, flow scanty, pain in back, headaches, constipation, pain in region of uterus, a heavy bearing down, profuse leucorrhea very offensive. She gave these as the symptoms when she first consulted a physician six and one-half years ago. She was treated locally by him for two years, using during this period all manner of applications, douches, suppositories and naseam, consulted specialist, he curetted, packed and treated case for two months with no marked relief. Advised removal of uterus; to this the patient objected; she returned home and continued local treatment until she finally gave up in despair. Some friend prevailed on her to try little sugar pills. She finally came to me, and I recorded her case in detail. I give the principal symptoms that guided me in my prescription. Menstrual period every three weeks, scanty, colored clothes green, lasts seven or eight days, severe headaches, a crazy feeling, attacks before menses so severe she loses her mind, gets crazy, believes she is going crazy, when she gets up she feels as if everything was pressing out, afraid to walk without supporting abdomen, tired and worn-out feeling, the bearing down so severe, kept a recumbent position two-thirds of her time.

Gave one dose Lil-tig. m., to be repeated every twenty-four hours for three days. Fourth day patient walked into office with an expression that gave me more satisfaction than words could convey. Her report that bearing-down pains had all left her, headache relieved, but she felt weak and was very apprehensive that her troubles would return; mind seemed anxious about this, as from some impending trouble; Ignatia 3x, one dose night and morn-

ing until relieved, to report in one week; patient returned in four days, relieved of all pains and aches, and you may be sure she meant it. Handed me a check for \$50 with the remark that "she was my patient from this time on."

Now, gentlemen, there is the case, make of it what you may. I never examined her uterus and do not know that she has one. The patient is well and free from any trouble at this writing.

Salvia off. in Nocturnal Sweats.

Dr. Amado Gort² records that Dr. Combenale (a homeopathist) employs this drug to combat the night-sweats of consumptives. He prepares the tincture by macerating one hundred parts of the flowers and an equal part of the leaves in 500 gms. of alcohol. He administers ten to thirty drops of this tincture a few hours before the expected time of the appearance of the sweat. Under its influence the perspiration ceases and its action may persist for more than eight days.

Professor Trosseau, of Paris, recommends this drug in immoderate and debilitating sweats—"sueurs immodérées et débilitantes." He also made a proving with an infusion of the leaves, which he records in his excellent work, "Thérapeutique et Matière Médicale," vol. ii., p. 434, and on the next page proceeds to praise it for its antisudoral virtues, after having said that it is decidedly sudorific. "Ce fait n'a pourtant rien de contradictoire." . . . Van Sweiten prescribed this drug in a wine, with success, with night sweats, which so weaken those convalescing from fevers. I remember that I was often forced to drink bitter infusions—"teas"—of sage to break up "colds," and especially for debilitating sweats following a broncho-pneumonia, when a child. I have found opium in the tincture to be a very useful remedy in profuse sweating after typhoid fever. In a nun who was convalescing from an attack of grippe, and who was obliged to change her underclothes from five to seven times a day and night, morphine, one-fourth grain to four ounces of water, promptly caused the immoderate sweating to cease.

Jatropha curcas in Cholera Infantum.

Dr. T. Dwight Stowe reports that on August 25th he was called to see an infant three weeks old. "The child was always delicate, and the mother had an insufficient quantity of milk. When I was called he had been sick ten days. Had at first a bilious diarrhea, with nausea and vomiting of the milk and water taken. The vomit seemed half albuminous. On the day I was called the child's symptoms had become alarming. He was extremely emaciated, skin shriveled, cold and icterous. Now and then he vomited water and milk, but had frequent, profuse, thin, watery, gushing stools, "pouring away in a torrent," and wetting the diapers through. Each stool was preceded by loud rumbling, as of water pouring from a bottle. He likewise had great thirst for water, stools coming on soon after drinking. Gave *Jatropha curcas* 30th in aqueous solution. The first dose was partly retained, partly vomited, but he vomited no more. The child had but three diarrheic stools afterward and improved rapidly; from a mere skeleton he, in some five days, recovered his embonpoint. Gave but two prescription of *Jatropha* and but two of *China*²⁰⁰ following the *Jatropha*.

Abies nigra in Intermittent.

This unusual remedy is advanced by Dr. E. A. Taylor to show the fallacy of depending on "the usual remedies:"

Case 1.—Albert B., aged twenty-eight years, janitor. Has had intermittent fever about a year. Allopathic treatment; also treated by some of our school who gave "the usual remedies" with the usual result—failure. Chill begins in the knees, about 8 or 9 a. m., accompanied by a sensation of a lump in the stomach. Chill lasts three or four hours, followed by heat, dull frontal headache, with dim vision and profuse perspiration. Chill every other day at the same hour; thirst with the chill and fever; bad taste in mouth; brown coating on the tongue; after eating feels lump in stomach, "very hard and about the size of an egg." This was my first case of intermittent fever. Should I give quinine and the "usual remedies?" I decided to try the law, treat the patient and let the ague take care of itself. He got *Abies nigra* and had no more chills.

Malandrinum 30 for Fistula in a Pony.

Dr. Alfred Heath introduces an original remedy of his preparation with this report: "Some years ago a young titled lady patient came to ask me if I could cure a valuable pony

of hers. The pony had had strangles, and as a sequela a complete fistula had formed in its jaw. It was a very valuable prize pony. The local vet. could do nothing, so Sir I —, a distinguished vet., was called down from London to see the pony. He pronounced it a complete fistula and said he must operate, but was afraid it was very risky, and that he might kill the pony. The opinion caused the lady to consult me. I gave *Malandrinum* 9, which I had recently made myself from a very advanced case of 'grease;' in ten days the fistula had healed, and remains well to this moment, and the pony has, since the cure, won several prizes at shows. With this remedy in high potencies, either 30th or 200th, I have cured several cases of fistula in human beings. Generally, the fistula heals up in a week or ten days."

[Dr. Heath is guided to this remedy by his idea of the relationship between fistula, phthisis and vaccination.]

Ammonium carb. in Uremia.

Mifflin, of Baltimore²², being struck by the view of Prof. Frericks, that uremia is excited by the ammonia carbonica produced by the decomposition of urea in the blood, proposes the use of that drug where symptomatically indicated. In its pathogenesis he finds: Forgetful, absent-minded, confusion and dullness in the head; gloomy and depressed, with frequent giddiness; headache, tearing pain in the head, with nausea and vomiting; vision obscured, with bloodshot eyes, and often diplopia; pale, bloated face, with eruptions and indurations; no appetite, and continued thirst, nausea, vomiting and heartburn; cutting pain in the bladder with great pressure and frequent urination, urine containing sandy and whitish sediment; shortness of breath on exertion; frequent palpitation, with hard, tense pulse; excessive somnolence. This is a striking picture of uremia. The writer has tried the remedy in four cases which presented these symptoms, in all with benefit. No permanent effect upon the kidney lesion was secured, however.

Sulphate of Duboisine in Paralysis Agitans.

Professor Xavier Francotte has used the sulphate of duboisine (on Mendel's recommendation) in four cases of paralysis agitans, with satisfactory results. The drug has a real influence on the tremor, but only temporarily since the action lasts only three or four days; the influence on the muscular rigidity is less and on the weakness and pains is nil. No

removing symptoms were caused by the drug except an increase when the dosage in one day was overtaken to four. Dr. prescribes it in the form of granules each containing one-half a milligram, three to six granules being given in the course of the day.

Tuberculinum in Post-Scarlatinal Nephritis.

Dr. H. Samlrechts, Jr.,²⁶ considers the tuberculin of Koch essentially homeopathic to acute nephritis, producing as it does fever, renal pains, albuminuria, and hematuria. He reports the following observations: "Last November I was called to see a child aged ten years, who presented considerable edema of the eye lids and the lower extremities. The urine was scarce, dark in color, and contained a large proportion of albumen and a small quantity of blood. In questioning the parents, I learned that the child had been attacked fifteen days before with a light fever, with sore throat and redness of the skin. These symptoms were so little pronounced that they had passed almost unperceived, and the child had continued to play in the street as usual, when he had been suddenly taken with shivering, and with general uneasiness, thirst, inappetency, then very soon the edema of the eye-lids and of the malleoli appeared. I commenced the treatment by mere. corros.; I then administered successively cantharis, arsen. alb., and phosph., without the least result. The disease continued to become worse. The swelling of the legs was considerable, and upon an examination of the stomach I ascertained a notable quantity of liquid in the peritoneum. I then prescribed tuberculinum 6x. Under the influence of this remedy, the symptoms improved rapidly, and at the end of fifteen days the child had completely recovered. Tuberculinum has been of great help to me in many cases of post-scarlatina. It failed in one case; the patient succumbed to uremic accidents."

Calcareo in Chronic Bronchitis.

A school girl, aged fifteen years, has had a cough pretty constantly for eight years, and as a last resort consults an homeopathic physician.

Cough loose, rattling, caused by tickling in the throat.

Aggravation from laughing, coming into a warm room, during the night when she often coughs without wakening.

Expectoration thick, usually swallowed.

Subject to frontal headaches, worse from

motion, and when severe accompanied by acid vomiting.

Vertigo if she arises quickly from a recumbent position, especially in the morning.

Thick, greenish nasal discharge.

Feet always damp and cold.

Sleeps late and is languid in the morning; feels well and wide awake in the evening.

1898, March 11. One powder calcarea carbonica 2m. Linckel, dissolved in four tablespoonfuls of water, one tablespoonful night and and morning until it is gone.

This worked a miracle in the case and converted a family to faith in Homeopathy. The cough was cured.—E. E. Case, M.D., in Med. Advance.

Bromoform Poisoning.

Dr. Larkin W. Glazebrook, Washington, D. C., reports an interesting case.²⁸ L. W., four and one-half years old, developed pertussis. She was given three drops, every three hours, of a fresh preparation of Merck's bromoform, which was continued for three weeks. Paroxysms, never severe, were improving, although three or four occurred during the twenty-four hours. The child got hold of the dropper, containing fifteen drops, and introduced the contents in her mouth. She had already taken the three-drop dose of the medicine. Ten or fifteen minutes later the child was seen to lie down on the floor, as if asleep. At midday, she did not respond to the dinner bell; the attendant attempted, but failed to arouse her. The child was then limp and apparently unconscious, though breathing quietly. Involuntary evacuation of bowels and bladder had taken place. The matron administered the white of an egg, and 12:15 p. m. the child vomited twice. Dr. McGee arrived five minutes later and found the child collapsed, cyanotic and apparently dead. Artificial respiration, removal of large quantities of mucus from the mouth, antidotes and stimulants, restored the child by 4 p. m.

During the toxic stage, the symptoms were most alarming—resembling the threatening narcosis occasionally seen in chloroform administration. Pupils only slightly dilated, conjunctival mucous membrane inflamed, blood pressure markedly diminished, cyanosis resembled very much that caused by administration of nitrous oxide gas.

It is interesting to note that the child has never manifested any symptom of pertussis since then.

In bromoform poisoning the general reflexes are entirely lost. There is general pallor, dilated pupils, collapse and heart failure. In several cases, when used as a general anesthetic, Von Horock has noted general cyanosis, especially of the face. Urine at times contained bromine. Benome and Mazza noted that the narcosis is slowly developed and passes off slowly. They refer to it as a possible valuable anesthetic, and have noted irritation of conjunctivæ and nasal mucous membranes.

Sepia for Corns.

A nervous, dark-haired school teacher, age twenty-eight, whom I have never seen, is tormented with corns.

Red swelling around the corns; pain worse before a storm and from heat.

When the corns are most painful there is also pain from the right hip down the thigh.

Morbid brooding over imaginary troubles.

Conjunctivæ yellow.

Dark circles under the eyes. Lips colorless. Sallow complexion. Tongue pale, flabby.

Heavy, dragging sensation, with pulsation in region of the liver; relieved by lying on the right side with knees drawn up.

Bowels constipated. Stool never satisfactory, feels that more remains.

Nervous when in company, especially if strangers. The stomach will become painful as if knotted up, ending, when she gets by herself, with a sinking sensation in the stomach, with nausea and faintness.

1897, June 14.—One powder *Sepia*, 3 cm. (Fincke), dry on the tongue.

July 27.—She writes: "Five corns have already peeled off. I have not had such comfort with my feet for many years." Her health also improved rapidly with a return of old symptoms, proving the correct adaptation of the remedy.—E. E. Case, M.D., in *Med. Advance*.

Lappa major in Skin Diseases.

Lappa major will cure, absolutely, many cases of eczema. It will not cure every case, there is no perfect specific in medicine, but if used intelligently it will help nearly every case. It will also relieve some cases of eczema of the face and body, but its principal range of beneficial action in eczema seems to be upon the disease when it attacks the scalp. In private practice we frequently meet with young ladies who are worried about an eruption on the face and neck, pimples that they cannot conceal with *creta preparata* or other cosmetics. For

these cases I keep a quantity of burdock roots on hand, and when they apply for relief I give them one of the roots with instructions to soften it in water for a couple of hours and then to apply it to the eruption by rubbing the blunt end upon each particular pimple. It is a great success. It clears the face and neck of every deviation from the normal color and texture in a month. The patient is instructed to use the root once a week, but not oftener.

The common burdock (*Lappa major*) is indigenous to North America and may be found in vacant lots in every city in the union. It selects a rich soil in which to reach perfection. The seedling roots are the ones used in treating these cases. It is easy to distinguish the seedling roots from those of the previous year. I gather the roots in July or August, as at that time they contain the greatest amount of active medicinal properties.

Iodine in Pneumonia.

Dr. W. T. Laird finds iodine particularly valuable in the third stage of pneumonia, when resolution is long delayed, and the fever assumes a hectic type, with severe chills, sudden and excessive variations of temperature, and profuse sweats. As an example he cites:

Roy B., a rather delicate boy, ten years old, was attacked with whooping-cough about the 1st of March, 1893. Some three weeks later an imprudent exposure brought on catarrhal pneumonia. Under *verat. vir.*, followed by *bryonia*, the disease pursued the usual course, and by the 1st of April the patient seemed to be convalescing, when he took cold and had a relapse. He again improved slowly under the usual remedies until April 15th, when the furnace fire accidentally went out during the night. He awoke in the morning thoroughly chilled, and had a second relapse. This time he did not rally, but steadily grew worse. At the end of the fifth week of the disease one-third of the left lung was still hepatized, and there were also scattered patches of consolidation in the right lung. The cough was slight and expectoration scanty. The sputum, examined under the microscope, showed mucous corpuscles, broken-down lung tissue undergoing fatty degeneration, and a few Koch's bacilli; but no pus could be detected. Every morning he had a chill, followed by high fever, the temperature, which was 96° at the beginning of the chill, rising to 105°, 105.5°, and on one occasion to 106°. This, in turn, was succeeded by profuse perspiration, during

which the temperature gradually fell until it again reached 100°, about 9 to 10 p. m., when the cycle of chill, fever and sweat was repeated, and lasted through the night. Sulphur, hepatic and sanguinaria were given without effect. Another physician was now called in consultation, and at his suggestion calc. phos., and at a second calc. carb., was tried, but with equally unsatisfactory results. At the end of the fourth week the patient was in a critical condition and was slowly but surely losing ground. Food he was now prescribed, ten drops of cod liver oil in a glassful of water, a teaspoonful every hour. Two days later he had only one chill during the twenty-four hours, and the range of temperature was reduced one-half, the maximum being 100° and the minimum 97°. The medicine was now given every two hours. In three days more the chills, fever and sweat disappeared, resolution commenced, and just twelve days after the first dose of iodine was administered the boy was discharged cured.

Melaleuca viridiflora.

M. Dubousquet-Lahorderie⁸⁷ calls attention to this tree, which is found in New Caledonia, from which an essence is obtained resembling that of eucalyptus. In pulmonary tuberculosis, administered by the stomach in dose of ten capsules (each four grains) daily, it gives rise to no disturbance. An oily emulsion of 2 per cent strength can be given hypodermatically. In this disease cough, expectoration, and fever cease and the weight increases. In coryza and tonsillitis, inhalations produce remarkable sedative effects. In diseases of the urinary apparatus excellent results have been obtained. In one instance albuminuria disappeared. In cystitis and prostatitis, irrigation with a 2 per cent aqueous solution is advised. For rheumatism, and neuralgia local frictions are recommended. For wounds a 5 per cent solution, for burns double this strength, produces an agreeable coolness and hastens healing.

Arsenical Pigmentation.

Dr. Harlaway⁸⁸ reports two cases of this pigmentation. One case, male, aged twenty-five, occipital neuralgia, took Fowler's solution in three drop doses and increased to twelve drops three times a day, when a conjunctivitis was produced. The larger dose was continued for five days, when a maculo-papular eruption, pin head in size, appeared on the thighs over the buttocks and lumbar region. The arsenic was then stopped and there was no extension

of the eruption. The lesions grew larger, coalesced, some acquiring a diameter of one-sixth inch and slowly changed to a dark-brownish hue, followed by desquamation. At the time of consultation a general brownish discoloration of the skin was observed and appeared to be made up of small macules. The patient's complexion was a sort of dark indian-red hue.

The second case was in an epileptic girl of about twelve years, who had taken arsenic for a long time. A morbilliform rash was followed by a dirty-brown or grayish mottling of the skin, with accompanying desquamation.

In both cases the pigmentation was limited to the seat first occupied by preceding red rash. Had the rash been of a diffuse scarlatinaform type the pigmentation would, in all probability, have been correspondingly diffuse. The writer had previously regarded arsenical pigmentation as a gradual process, of a more or less uniform staining, and not preceded by congestion or inflammatory changes in the cuticle.

Apis mel. in Ovarian Dropsy.

Dr. George Lee verifies Hering's symptoms credited to Apis: "Feeling of weight; heaviness in the ovarian region." "Right ovary enlarged." "Dropsy of the ovaries (right)." The value of Apis in this lesion had been doubted by Hughes.

"In the fall of 1876, a German woman, married, thirty-six years of age, called upon me for a prescription for diarrhoea. I prescribed Ars.³, in accordance with the apparent symptoms. In about a week she returned to report a temporary check to the discharge, followed by worse diarrhoea than before. I prescribed Ars.⁶⁰. She remained away two weeks, at the expiration of which time she came to me in much distress and alarm. Her diarrhoea was as bad as ever, and she stated further that she passed very little water, and that there was a lump in the left ovarian region. She was much emaciated and her countenance was anxious. She was so weak that she could stand upon her feet with difficulty, and complained of a constant feeling of weight and heaviness in the ovarian region, left side, however.

I found the ovary as large as a regulation baseball and a good deal heavier. By placing one hand upon the abdominal surface, and introducing two fingers of the other into the vagina, I could get quite an accurate idea of its size and weight.

I prescribed twenty-four powders of the 3d trit. of Apis, directing her to take two powders a day. I also recommended a daily bath in strong brine and checked the diarrhea.

The treatment promptly secured a copious flow of urine; the tumor rapidly diminished until it entirely disappeared. The woman regained strength and color, and as yet has had no return of the trouble.

Quinine Blindness.

A. W. Calhoun¹¹ reports the case of a patient, a ten-year-old girl from the river bottoms of Arkansas, living in a flat section of the country, upon the banks of a river, where, in consequence of the prevalence of malarial fever, the inhabitants were accustomed to use quinine freely. The patient had a chill which was diagnosed by the father as congestive, and large doses of quinine were frequently given, until, at the end of the third day, the child had taken 720 grains.

The patient becoming unconscious, the father called in the family physician, who restored her to consciousness, after several days of vigorous treatment, but she was totally blind.

In consequence of her poor health the eye was not examined until six weeks had elapsed, at which time there was a typical white atrophy of both optic nerves, the blood vessels of the fundus were diminished to mere threads, and there was not the faintest perception of light. The pupils were widely dilated and responded to light very imperceptibly. The hearing greatly affected, but much improved. Strychnine, electricity and general tonics were used for three or four weeks, but total blindness remained permanent.

Arsenicum in Cancer of Rectum.

Dr. Frank Wieland reports the following case, the diagnosis of which was made by competent allopathic authority:

The first was that of Mr. W., a tall, muscular man, forty-eight years of age. About fifteen years ago, while overheated, he drank a quantity of ice water, which occasioned a diarrhea, that in all these years had troubled him incessantly, and had resisted all treatment.

About three years ago the stools became slimy and mixed with blood; finally all control of the sphincter ani was lost.

In February, 1897, he went to the Mercy hospital of this city, where a superficial examination resulted in a diagnosis of internal piles. The pain and stools continuing, he was

anesthetized and examined more carefully, with the result that a carcinoma of the rectum was discovered. It was so extensive that operative measures were deemed inadvisable and he was discharged as an incurable. He then came under my care. The lesion, however, was so extensive that it seemed folly to operate, despite the wishes of the patient and his family. He then went to the County hospital and was denied an operation there.

Meantime, I had given the case some study and had put him under medical treatment. The symptoms plainly called for Ars., and he was given the remedy in the 1 m potency.

The improvement was almost immediate. The stools decreased in number and became more consistent. After two months of treatment he was able for the first time in fifteen years to sleep all night with no bowel movement. He has now been under treatment for about three months. A month ago the character of the stools changed. He described them as being long and hard and floating in a quantity of colorless water.

I gave him phosphorus 1 m.

He then left the city to work on his farm, and in a recent report to me he was working every day after a lay-off of two years; was sleeping all night; was passing only two stools a day and these were formed. I do not say the carcinoma is cured, but the patient is so much relieved in every way that we feel that we have no quarrel with it.—Med. Adv.

Senega for Sneezing.

This case, by Dr. Clinton Enos¹², emphasizes a neglected remedy:

The patient, a very short and a very fat girl of ten years with cold, clammy feet and hands and sweaty about the head, has had spells of sneezing for the past two years—ever since she had whooping cough. She would have several spells of sneezing every day that would last for half an hour or so. She had sharp pains in chest and temples during these attacks. There was also a large quantity of mucus in nose, with a stuffed-up feeling. When she would have these spells at school she annoyed the pupils so that the teacher would send her out into the hall till she got over them. On Nov. 23, 1896, when on a visit at her home, I was asked by her mother to prescribe for the sneezing. I did so, but it did not do any good. I studied the case more carefully. I could not get hold of symptom as I did in the other case, so I took my Lip-

and two dozen courses of remedies till I found that *arsenic* was the remedy. I gave her one dose of the 3rd. Dec. 2, 1896, and in a week the swelling was all gone and she has not had any more of it to this day, although she had attacks three months later that and has had two or three bad colds since. The stuffing up of the nose has disappeared.

Arsenical Poisoning.

Louise R., age five years, an exceptionally healthy blonde girl, and very large for one of her age, swallowed a teaspoonful of Fowler's solution of arsenic, by mistake, at 11 a. m. About twenty minutes after the accident she was deeply vomited by the administration of common salt water, and large quantities of fresh room were given her throughout the afternoon and night. At 1 p. m. I found the patient lying limp in her mother's lap, with a temperature of 97°, pulse 155, small and intermittent; respiration 40; lips dry and cracked; tongue small, red and pointed; great thirst for large quantities of cold water, which would be vomited immediately after being taken into the stomach; the skin deathly pale, and covered with a warm perspiration, which was most profuse about the head and chest. Although the drowsiness and muscular weakness were marked, the patient was very restless, insisting upon being continually turned and changed in bed, and taken from place to place about the room. Between 2 and 3 o'clock the bowels moved three different times, the discharges being of pappy consistency, yellow, frothy, excoriating and offensive. The stool was small, preceded by intestinal pain, and followed by prolonged tenesmus and exhaustion. By 4 o'clock the child was fairly comfortable. During the night she was continually thirsty, and complained of pain in the stomach, but was able to sit up in bed the next day, and, ultimately, made a perfect recovery, although she was conspicuously chlorotic for many months. — Dr. E. J. Burch.

Calcium Chloride for Hemophilla.

An extract published in this column last year described the action of this drug, but only casually hinted at the warning with which the following item closes. It emphasizes the unsatisfactory character of physiological treatment, with its certain limit, the reaction.

The treatment by calcium chloride, which is based on physiological findings, seeks neither to close the rent in the vessels nor to reduce the blood pressure, but to heighten the co-

agulability of the blood generally, and so to favor thrombosis at the bleeding points. The salt must be given in full doses of from 15 to 45 grm. every four to six hours, or in great emergencies from 20 to 30 grm. as an initial dose, and then from 4 to 5 grm. every quarter of an hour for a few doses, subsequently as above. Investigations seem to indicate that the coagulability of the blood increases during the administration of calcium chloride up to a certain point, and then declines and may fall even below the normal. For three or four days the coagulability increases, and therefore, during a period not exceeding this, the drug may be given, dissolved in either water or milk, or with the addition of some extract of licorice.²⁸

Coca in Neurasthenia.

Dr. E. S. Chapman²¹ urges the use of coca, particularly upon the following indications, which he has conclusively verified:

1. Irritability, despondency, and inability to fix the mind upon any subject for any considerable time.
2. Timidity and dread of appearing before society or audiences, even with those who have been accustomed to do so for years.
3. Extreme bodily weakness and lassitude, necessitating the patient to occupy the recumbent decubitus many hours daily.

One interesting verification Dr. Chapman reports thus:

I was consulted by a gentleman who had for many years been before the public as a speaker and a writer. During the late presidential campaign he had stumped his state, making political speeches six nights in the week for two or three months, and after the election he went into a state of mental and bodily collapse. I put him on *kali phos.*, *phosphorus*, *zincum phos.*, etc., as I thought them indicated, but with no perceptible benefit. The case was about to pass from my hands when he mentioned a symptom that led me to the selection of the indicated drug. It was this: He felt a timidity when in company or before an audience that was entirely foreign to his nature, and which he could by no means overcome. Added to this were extreme irritability and hypochondriasis, lack of will power, so that he could not fix his mind upon any subject for more than a few moments at a time. Great weakness of the body and lassitude, causing him to spend most of his waking hours in the recumbent posture. All this was the exact op-

posite of his usual custom, his normal condition being that of the greatest activity of body and mind.

As I said before, I saw coca so plainly indicated by the above symptoms that I put him on one dose of the c. m. potency, and nothing was left to be desired. His restoration to health was immediate, and in a few days he was about his usual labors.

Ammonium carb. in Acute Coryza.

To cure an "acute cold" promptly is certainly very gratifying to both patient and physician. The following case illustrates the prompt action of ammonium carb:

J. H., aged fifty-four, came for relief of the following symptoms: Morning—Eyes burning, with great redness of lids as though from weeping, profuse lachrymation. The nose was stuffed, although there was a profuse watery, acrid secretion, with tickling in left nostril, causing sneezing and a constant desire to blow. At times some bloody mucus was discharged. A feeling of pressure in the left lung and some soreness which is worse when coughing, and also during night and when lying down. The limbs ache and he feels weak all over. Ammonium carb. 3, for twenty-four hours, and then sac. lac. At end of forty-eight hours he said that he was well.—Geo. P. Hale, M.D.

Benzoic acid for Enuresis.

Dr. S. C. Scholes (Med. Adv.) tells how his own little boy was troubled with difficult urination from birth. Circumcision was strongly advised by the attending physician, but not resorted to. However, the urethral canal was dilated, apparently relieving the trouble. A few months later I noticed the urine was scanty, only a tablespoonful or two being passed at a time, cream-like in consistency, and of a milky color. About this time, too, eczema appeared, almost covering the lower limbs. He had homeopathic treatment; would improve somewhat and then get worse—this state of affairs continuing for about three years. The eczema was finally dried up with cuticura and tar soaps and some lotion prescribed by the doctor when this incontinency of urine appeared. Urine was very profuse, offensive, of a sweetish odor, involuntary only in the day time, not during sleep. He grew worse and worse for a year. His clothing had to be changed several times a day and a daily clothes' washing take place. Clothes were

starchy and whitish where urine touched them. As the little fellow was a neat and careful child, it was very mortifying to him, especially as he was blamed for it; but the desire to urinate was sudden and irresistible. Having tried a number of remedies without effect, I consulted one of my classmates and he, noting the disagreeable odor, suggested Benzoic acid. I gave him a few doses of it and a perfect cure resulted. He is now eight years old and has had no return of the trouble. The eruption, however, reappeared, this time on the breast and arms, but nothing was ever used again to dry it up. Some months after the use of Benzoic acid Dr. H. C. Allen retracted the prepuce, broke up adhesions around the glans and gave him a dose of Psorinum. The boy is now a well developed child mentally and physically, and has been well and happy for three years.

Barrium chloride in Heart Disease.

This drug, which homeopathic provings and clinical observations show to be of value in heart disease and oncurism, is yet so far neglected that the following statement of its properties from an old school source will be interesting:

Barium chloride (Therap. Gaz., XXII, p. 236) in small quantities possesses a physiological action closely allied to that of digitalis so far as its influence upon the heart is concerned. Thus it slows the heart very greatly, steadies cardiac rhythm, and markedly increases the quantity of blood thrown out of the ventricle at each contraction. At the same time it increases blood-pressure, as has been proved by the careful studies of Kobert, of Dorpat, and it would seem probable that it exercises a more powerful systolic influence over the ventricles than does digitalis, the slowing of the pulse being due rather to an excessive systolic action of the drug and to high arterial tension than to any effect which the drug may exercise upon the pneumogastric nerve. The drug is therefore one which apparently should prove useful in a certain proportion of cardiac diseases, which for one reason or another fail to obtain benefit from digitalis.

A large number of clinicians have employed this drug in the treatment of heart disease with failing compensation, both in adults and children, particularly when the pulse is weak and irregular, and is lacking in volume. The writer has used this drug in a number of cases

and he reached the conclusion that it is of value but must take place after both digitalis and stramonium as a cardiac tonic. The dose is a teaspoonful of the 1-per-cent solution three times a day to an adult or one-half this to a child from six to ten years. These doses do not cause irritation of the gastro-intestinal tract, and very much larger doses of barium are required before it will act as an irritant poison. There are, therefore, no reasons why it should not be tried in the cases mentioned.

Lachesis in Endocarditis.

Dr. C. E. Colwell tells how in February, 1902, L. E., aged five years, was, by a disobedience of orders, permitted to acquire an acute endocarditis and rheumatism of several joints by exposure after scarlet fever:

"He grew rapidly worse, in spite of all that was done for him, until it seemed that he would surely die. Though feverish his skin had a peculiar yellowish pallor; the cachectic color that we see occasionally following scarlet fever or diphtheria, and a few other diseases that deeply affect the blood.

"Almost from the first of his rheumatic attack, all of his symptoms had been worse upon awakening. He would waken with a whine or a cry, as though in pain. Nothing for a time would quiet him. It did not seem to be pain from lying in one position too long, which could be relieved by moving (the *rhus*. symptom), for moving him did not help matters. For a week he continued to grow worse, and to show more prominently the lachesis indication of 'all symptoms worse after sleep.' In addition there was the history of the blood poisoning scarlet fever, a few weeks before, and the peculiar cachexia, also pointing to lachesis.

"Though the 'writing on the wall' had been plainly lachesis, as I had not used the remedy and as our potency was a high one, I could not at first get my courage to the point to risk it, so I used various remedies that had been oftener indicated, and therefore oftener used in my rheumatic cases, such as arsenicum, hyemina, colchicum, *rhus tox.*, etc.

"When a week had passed and my hopes were at low ebb, I reached the point of using lachesis. I felt its results could be no less satisfactory than from the remedies he had had. I sent thirty grains of the 8x trituration of lachesis, to be dissolved in a glass half full of water, a teaspoonful to be given every half hour.

"The next morning the uncle, his nurse, said, 'that was a wonderful medicine, for he began to improve after having taken it for two hours.' The twelve hours since I had seen him had made quite a perceptible improvement of many of his symptoms. After that he steadily gained so that three weeks afterward I discharged him. He was left with a slight mitral murmur, which he will always have. There is no insufficiency."

Hyoscyamus in Insomnia.

The following remarkable abstract appears in *Neurological Centralblatt*, 7, 1897:—

Giusquiamo contro l'insonnia, per Silvio Venturi (*Archivio di Psichiatria*, xvii, Fase. 3). —With henbane, in homeopathic exhibition, V. has obtained excellent results in his asylum in cases of sleeplessness (simple, not complicated with maniacal excitement) and he recommends it most warmly without avowing himself a homeopath. The sleep thereby produced is a natural, not a toxic one. To the fact that he uses the remedy in homeopathic form he ascribes the lowered mortality in the asylum, it having decreased to a minimum of three per cent, while surely the customary excessive dosing with toxic hypnotics leads to the mental and bodily ruin of patients. He prescribes of the "*Globuli Hyoscyami homeopathici* (30th dilution)," two in the morning and two in the evening; the results are seen generally on the third or fourth day; from time to time the remedy must be omitted to avoid becoming accustomed to it.

Allium cepa in Peritonitis.

Dr. Mary K. Mark adds to the cured symptoms of *Allium cepa* in the following diagnosis of diffuse peritonitis:

A relapse left her weak and inert.

Tenderness in both ovaries, so that she sat and walked bent, and the uterus felt heavy and prolapsed.

Having been in the house for weeks, and the sun serving as a temptation, she took a walk of three blocks.

I was sent for that evening, and found she had taken cold.

The symptoms were violent sneezing and coryza.

The upper lip and nose were red and almost raw from the discharge and constant wiping. *Allium cepa m.*

The following morning she was met on the avenue, walking briskly, and smilingly said that all her cold and pains even were gone.

and that that powder was quick and sure, and she wondered how a medicine, intended to cure sneezing, could cure ovaries at the same time.

Her old symptoms had failed to respond before that, and I am sure I was as surprised and even more pleased than she.

Garrine.

Garrine is an alkaloid discovered by Armendariz⁷ in the bitter bark of *Garrya racemosa* Ramirez, a Mexican cornaceous plant. It is crystallizable, is odorless, very bitter, and readily soluble in water and in alcohol. Nitric acid colors it pink. It possesses the property of increasing the number and depth of the respiratory movements; an intravenous injection of the decoction of the bark may cause death by paralyzing the respiratory centers. The drug acts also on the digestive tract as a bitter tonic. It has been employed in atonic diarrhea, in the form of tincture, teaspoonful doses being given thrice daily. It is best exhibited, however, in the form of its hydro-alcoholic extract in pills containing 0.1 gme. ($1\frac{1}{2}$ grn.) each.

Sambucus in Malaria.

Dr. H. W. Conrad^{8, 38} says: "I have used *Calendula* in every imaginable solution of continuity and it has never failed to benefit, though I have had occasionally to combine it with other remedies to effect a perfect cure. Six cases of gonorrhea have been perfectly cured by using it as an injection in solution varying from 20 to 50 per cent strength. Combined with *Hydrastis*, equal parts, I have cured five obstinate cases of gleet. It is invaluable as a local application in vaginal solutions of continuity and in diseases of the cervix. In obstinate catarrhal discharges from the vagina a few tampons saturated with *Calendula* usually accomplish a great deal.

Reviewing the past year I cannot now recall the many cases in which I have used it successfully. The last case in which I used it was following an amputation of arm. On account of pain I removed the dressing several days sooner than I otherwise would have done. After removing the stitches there was some gaping in the center and at the angles. I filled the places with *Calendula*, applied adhesive straps and gauzes, and at the next dressing the stump was nicely healed.

It prevents suppuration and stops it when present. In fact, I sometimes think that the

appearance of suppuration is the indication for its use.

It is my intention to use this remedy, full strength, in the next suppurating tubercular joint affection that comes under my care. If that fails I shall combine it with iodoform as an injection."

Thallium for Baldness.

In the "French News" column of the Chemist and Druggist we came across a note on the effect of Thallium, which we have no doubt homeopaths will soon turn to good account. Here is the paragraph:

"Dr. Huchard read a paper at the last meeting of the Paris Academy of Medicine on Acetate of Thallium, which was formerly advocated by Dr. Comenale, of Lille, as a medicament against profuse perspiration in certain cases of serious illness. It appears, however, that its useful influence is counterbalanced by the fact that it causes the hair to fall off with great rapidity. Dr. Huchard exhibited at the meeting several photographs of patients who had become quite bald in several days. He was consequently very emphatic against the use of the remedy."

There is all the difference between the two schools in this note. To the allopath this is a "curious effect" merely, and serves to condemn the drug. To the homeopathist it brings to light a new remedy for a troublesome affection which is by no means too well provided for.

Thallium is a rare metal, whose atomic weight is 204.2, its symbol being Tl. It receives its name from the green line it gives on the spectrum, through which it was discovered by Crookes in the residuum left from the distillation of selenium. Thallium has a bluish white tint and the luster of lead; is so soft that it can be scratched by finger nail. Specific gravity, 11.8. It belongs to the lead group of metals but has peculiar reactions of its own. It is used in the manufacture of a glass of high refractive power.

Calendula in Surgery.

Dr. C. Hoffmann Peters³⁹ re-emphasizes the opponents of quinine in malaria by describing the case of a young woman whose chills had only been aggravated by that popular remedy. The case, of six months standing, was extremely irregular.

"Sepia stood out most prominently in my mind because she was a perfect *sepia pictus*. However as I had not made it a habit to pre-

and for future. I began and took her case. The first symptom of importance she gave me was a severe tickling low down in the throat which produced a constant cough. This always from the first came on from a chill to an hour before each chill. Chill irregular, would last from one to two hours, followed by fever, and severely an thirst. Second stage followed by much much worse, but as soon as asleep became hot and dry (opp. thuja), the sweat stained the skin yellow. These were all the symptoms I could get. I gave her three powders of sambucus nigr. 500x., one to be taken each morning, dry, on the tongue. The day following the first powder, she had a severe chill, since which time (now six months) she has not had a sign of a chill."

Blatta or. in Asthma and Emphysema.

Mr. C. K., age thirty-nine. Employed at post office. Has suffered for five years. Has been treated for five years. Has been treated for two years to my knowledge, without any benefit. Main remedies were phos., ipec., rhus. I then saw him, and after physical examination recorded the following: Clinical symptoms: Heaviness on the chest on lying, ancl. —cough. Dyspnea. Hard cough in morning on getting up. Cough after sleep agg. by dry air and sunshine. Wheezing; heard even at a distance. Expectoration white, lumpy, agg. by hot drinks. Remarks: I began with ipec.,⁶ which relieved for a month. Kept him on it until and phos. for two months. Five months later gave him blatta 6th, and he returned in about two weeks much better, and says the medicine is "grand." Gave him more at intervals for slight relapses. Met him last month and he is practically cured. Now nearly five years — John Arshagiani, M.D.⁷⁹

Calcarea carb. in Asthma.

Miss B., age forty-seven. Married. Large, stout woman. Has had frequent attacks last five years, nearly every time after coming home from the country. Last year was relieved by rhus. Same remedy in various potencies had no effect. Pathogenetic symptoms: Asthma in the forenoon when taking a walk in the open air. Difficult respiration. Must sit up and incline body forward. Aversion to cold air. Clammy sweat on hands, feet and face; most at night and from exertion. Went 3 a.m. to 9 a.m. Remarks: It was given about 10 a.m. after the attack commenced, and her symptoms were distressing. Relief followed in two hours and continued to im-

prove, so that breathing was quite clear. Teaspoonful in water every hour for twenty-four hours, and a powder three days later.— Dr. B. G. Clark.²⁰

Natrum mur. in Diseases of the Lachrymal Sac.

Dr. Wassily, of Keil⁸, reports the following case:

Aug. 8, 1895. Miss G., aged thirty, suffers from a swelling of the inner canthus of the right eye, as large as a bean. When pressed, a watery secretion which is liable to become cloudy, escapes. The conjunctiva palpebrarum reveals a moderate vascular injection. Her general health is not good. She has much headache, usually in the forenoon, with improvement toward evening. She has pressure in the stomach in the afternoon, thirst, bowels inactive. The urine frequently has a reddish sediment; menses regular, with profuse leucorrhea before and after. Windy and wet, cold weather aggravates the complaints of the eyes. Disposition depressed and irritable. Natrum-mur. 200, a dose night and morning for three days.

September 6th. The general condition is much better; pressure in stomach is gone, and the headache nearly so. No essential difference perceptible in the lachrymal sac. Natrum-mur. 200, a dose every week.

November 26th. The enlargement of the sac has disappeared; only with difficulty may a drop be squeezed out. Natrum-mur. 300, a dose every ninth evening.

December 21st. The patient wrote me, in speaking about the case of the child, that she has no symptoms of the disease in her eyes remaining, and her general health is perfect.

Zincum met.²⁰⁻⁰ Cures Cataract.

Dr. T. W. Payne⁴ secured the following brilliant result from zincum, although no symptoms of the drug refer to opaque lenses.

The case was that of a lady, fifty-eight years of age. Striae of opacity existed in both crystalline lenses, but the left one was so dense, and the visual acuity so greatly blurred, that it had become practically useless for vision, in consequence. The history of the case showed a condition of inflammation of the choroid in the left eye, whereby a degenerating change had occurred in the crystalline, causing numerous and dense stripes of opacity in its cortex, with much haziness existing in the interstices between the radiating, dense striae. Her symptoms, all being referred to the left eye, consisted of a severe, bruised, sore, smarting,

burning, itching and stinging sensation, at intervals, coming suddenly, as if pepper had been thrown into the eye, causing great and scalding lachrymation, much spasm of the lids, and general cringing therefrom; these spells occurred more markedly and more often in the evening. The eye and lid had spells of burning and dryness, so intense as to produce a feeling as if the eyeball was adherent to the eyelid, accompanied by a sensation as if a stick was under the lid, scratching the eyeball. Had spells of flickering before left eye; saw blue and green rings, floating in the left visual field; a green halo is seen, at times, around the flame of the gas jet. Although these objective symptoms might suggest a possible tension of the eyeball, such did not exist. A slight conjunctival irritation existed, with a tendency to agglutination. Eye symptoms were all markedly worse from warmth, from warm days, and by artificial heat, both of which caused an aggravation of all her symptoms. She was impatient, nervous, tremulous, all being aggravated by every mental emotion. A marked choreic condition existed, with jerking of individual muscles of the face, nose, ears, mouth, and sometimes of the arms, which latter symptom necessitated much effort of the will to restrain, and which proved only partly successful. She had some jerking of the body during sleep. The choreic expression was largely instrumental in calling my attention to zincum, which proved also equally effective in clearing the advancing opacities in the lens substance, as well as curing the spasms of muscles. In six months, under an occasional dose of zincum 200, the right lens had become perfectly clear, and the vision in the left was markedly and steadily gaining. Her eyes had compound, hyperopic astigmatism; the preponderance of astigmatic curve being vertical (90 degrees) in the right eye; while in the left it proved exactly at right angle to this, viz., horizontally (180 degrees). Glasses were adjusted that exactly neutralized the refractive error, and proved a comfort in use. Eleven years later, the right lens was still fully transparent, and the left lens, though having a few dense streaks in its substance, had cleared so that large, perfectly transparent interstices existed throughout its area, that permitted entirely distinct and practical vision. Under the proving of zincum met. are the following symptoms, viz:

The left eye is more markedly affected than the right, though both are influenced.

Redness with intense burning, stinging, biting and itching, as from salt, in left eye. Scalding lachrymation. Sensation as if the eyelids adhered to the eyeball, and actually do so. Marked aggravation from all kinds of symptoms of zincum are those of nervousness, irritability, irascibility, and great impatience. Twitching of muscles, as well as jerking of various muscles. Choreic jerks through the body during sleep.

Nitro-Glycerine in Spasmodic Croup.

Dr. G. G. Marshall¹ has found in nitro-glycerin an ideal remedy for spasmodic croup where steam inhalations and emetics fail, or where they depress too much to bear repetition. He recommends it to be given in small doses frequently repeated. To children from five to ten months old he gives from one to one hundredth to one six-hundredth of a grain, repeated in from five to ten minutes if no effect is noticeable. Usually in ten minutes there is marked relief in the dyspnea and general appearance of the child. By repeating these small doses from every fifteen minutes to once in one to three hours, the laryngeal spasms are controlled. Sometimes it is not necessary to repeat it more than once or twice; at other times the remedy has to be continued at more or less frequent intervals for two or three days.

Orthoform, A New Anesthetic.

MM. Einhorn and Heinz² have just discovered a new anesthetic agent, to which they give the name of orthoform. This substance belongs to the chemical group of aromatic amido ethers; it is exactly "p-amido-n-oxy-benzomethylic ether." It consists of a white, crystalline, light powder; tasteless and odorless; is of feeble solubility; action slow, but as a compensation, its effect is durable. Orthoform produces soluble salts with acids, which also possess anesthetic properties, but they are acids, and therefore cannot be used upon mucous surface, to which they would be irritating. Applied to the surface of a wound, or an irritated mucous membrane, orthoform, in powder or pomade, renders them insensible. This has been clearly proved by experiments upon numerous patients. In burns particularly, which, as we know, are painful, orthoform stops the most violent pains in a few moments, and the relief lasts for many hours. As it is not toxic, rabbits and dogs absorb from two to six grams daily. A new application may be made as soon as the anesthetic effects sub-

water, and the influence of the organism is most marked. For example, in a case of cancerous ulcer of the anus, in which the pains are so enormous as to render sleep impossible. The remedy should be powdered for a week, and the quantity applied should be 50 grains; the patient does not suffer, and no inconvenience follows the application for cancer of the stomach may be dosed. Ten grains are given daily by MM. Fournier and Frenzy. In all cases of wounds or incisions of the skin or mucous membranes, it is strong, soothing, and hastens the cure of morbid conditions. It has no action upon the internal sense, but is powerfully anesthetic when used locally upon the mucous membranes.

A Proving of Sepia.

A striking confirmation of the well-known Sepia indication of Bachemann is sent us by a physician of Baltimore, whose name is withheld at his request.

His wife, a typical Sepia patient, came to him with a headache. On well known mental indications, weeping, irritable mood, etc., he gave her Sepia ox. his own dilution. Three days later she reported that she was having hemorrhoids that came from her in long stringy ropes, that there was a feeling as if all of her internal organs were falling from her; and that she wanted to sit with her limbs crossed to prevent the organs falling out.

The physician assures us that his wife is perfectly healthy, never had leucorrhea before, that the remedy she took cleared up the hemorrhoids, and that she has no knowledge of any homeopathy.

Nitric acid in Epilepsy.

Dr. Walter M. James has had good results, as he writes:

The patient was a young girl who had the epileptic attacks every month at the access of the menstrual flow, although they were not wanting in the intervals between the menstrual periods. At each attack the patient would fall down with a scream, and then go through the usual phenomena of the convulsions, during which both arms would become dislocated at the shoulder-joint. The patient would come out of these crises with the exclamation, "What did you see?" and then a physician had to be called to reduce the luxation. The patient had probably been treated with mercury before the editor had charge of her case. Her tongue was deeply indented upon the edges, and with sore pimples upon the tip. Every

day she had numerous insensible spells, called by pathologists "petit mal." These insensible spells would amount to as many as fifty in one day. Six years ago she came under the care of the writer, and he gave her a number of remedies without any perceptible effect until, after prolonged study of the case, he decided upon nitric acid. This was given in the two hundredth potency in occasional doses and persisted in, up to the present time. Then the spasms were found to come at longer intervals. Instead of once a month, they came once in two months, then once in three months. Later they came once in five months, then once in six months, then once a year. At the time of writing this editorial there has been no spasm for one year and three months, and the spells of petit mal have been reduced to two or three a day, while some days pass without any at all! The bowels, which were obstinately blocked, are now regular, and the little woman is bright and hopeful and making herself exceedingly useful among her friends with whom she resides. In the last two or three spasms there was no dislocation of the two humeri.

Sanicula in Chronic Conjunctivitis.

Dr. R. E. Reiding¹ prescribed this unfamiliar remedy in the case of a boy aged five. Since he was one year old he has had inflamed eyes, especially the conjunctiva, which is very red, worse from playing hard. Photophobia, worse from sunlight. The lids are stuck together in the morning with a brown matter so profuse as to run out on the pillow. The eyeball is covered with mucus which obstructs the sight and has to be frequently wiped off. He has frequent diarrhea in the day time or in early morning. He has also a few itching pimples on the upper arm. *Sanicula* rom (Skinner), seven powders, one to be given each day, cured in the space of one month.

[The proving on which this cure was based was collected by Deschere in the North American Jour. of Homeopathy, Oct., 1897.]

Podophyllum for "Burning Tongue."

A young man had for some weeks a burning sensation along the left edge of the tongue, occasionally shooting down to the tip or through to the opposite edge. At times the burning was so severe as to be very distressing, and it was continually very annoying. His health had been somewhat impaired for years, the condition being somewhat like that commonly called "bilious" with a catarrh of the

stomach, duodenum and bile ducts. At times the blandest food could not be taken without great discomfort following.

He had found some relief from belladonna, but mercurius, colocynth, arsenicum and thus tox. had been taken successively but the burning continued. Podophyllum 3x was finally prescribed and prompt improvement followed. In two or three days he was much improved, and in a week the tongue was well.

Podophyllum has a marked action on the mucous membrane of the stomach and upper bowel, and on the liver, stimulating its action. It should doubtless be used in many bilious conditions where some one of the mercurys is ordinarily given.—W. A. Burr, M.D.¹².

Symptoms Following Use of Camphorated Oil.

Dr. Francis S. Tidcombe, in the Lancet, states that a male child, aged one year and ten months, was given a teaspoonful of camphorated oil instead of "cough mixture." When the mistake was discovered (some two or three minutes afterward) the nurse gave the child a teacupful of water with a teaspoonful of salt in it. The child did not vomit or show any symptoms until about twenty minutes later, when he fell on the carpet "in a fit." The fit lasted "a few seconds," and the child remained unconscious. When I saw him he was quite unconscious, the extremities were cold, the breathing was deep and slow, there was hardly any pulse at the wrist, the eyes were half closed, and the pupils were widely dilated. I applied hot sponges over the heart and administered a weak current of electricity. He rapidly revived and was again sick. As soon as he could swallow I gave him a copious draught of warm milk and water, which speedily returned. Within half an hour he was able to walk. He was sick twice more after drinking milk, and decidedly drowsy all day. The strength of the camphorated oil was about 1 in 4, so he must have taken about 15 grains of camphor.

Cuphea vis. in Cholera Infantum.

Ten years ago Dr. A. A. Roth⁹ reported his experience with this remedy in the treatment of cholera infantum. It read like an Arabian tale, but a little experience with the drug has taught us to have a great deal of respect for the red pennyroyal. Dr. Roth noticed that the best results were secured in those cases arising from acidity of the food; vomiting of undigested food or curdled milk, with frequent green, watery, acid stools; child fretful and

peevish; can retain nothing on the stomach, food seems to pass right through the child. The symptoms remind one a little of chamomilla, but as they are stultified it is seen that the systemic affection is deeper than one finds under the latter remedy. Dr. Roth used it in from one to five to ten-drop doses of the tincture, which is a beautiful dark-green color when made. No doubt but its action is dependent upon the tannic acid with which it abounds.

Asafetida for Excessive Sneezing.

Dr. O. S. Smith² offers this cure by the similitum where all local means had for years failed:

Mr. B., aged twenty-four, Idiot and neurotic, for three days has been sneezing almost constantly. Similar attacks of several weeks duration in June and as many in July have, for five years failed to respond to general, local or climatic treatment. The nasal tissues were acutely hyperemic, and so hypersensitive that the slightest touch of the mucous membranes precipitated a prolonged and violent attack of sneezing, some chest constriction and "flying pains." Has always been excessively nervous at these times. As there was no discernible organic lesion, asafetida 2x was prescribed. The perspiring fellow was stripped of his flannels and finally induced to remove shoes and stockings while indoors. Two days later he had sneezed less than a dozen times, from which time the recovery was rapid and uneventful. I believe this to be a cure, and a permanent one, because the underlying neurotic factor and its symptomatology were covered by the similitum, asafetida.

Senecio gracilis in Diseases of Women.

Dr. Frederick Kopp³¹ states that senecio gracilis has the power of rendering the periods early, late, or even of suppressing them. It is consequently of service in the amenorrhoea of young girls with dropsy. In dysmenorrhoea from anemia it has a good reputation. It is employed in strumous cases, where the pain is worse at night. It is also used in other forms, whether the menses be abundant or scanty, provided that there be disturbances of urination. In retarded menstruation it acts rapidly and efficaciously, rivalling some of our best uterine remedies, as puls., caulo., calc., carb., erigeron can., and sepia. It is used where the menses are too early and abundant, to be given during the periods. It is frequently indicated in irregular menstruation, whether it be too

early or late. When the flow has stopped from a cold, success will often cause it to reappear. Very frequently, in young girls, a leucorrhœa will relieve the flow at the same time that they suffer from urinary complications. This complex yields rapidly to *Succin. gracilis*. It is also a grand remedy in scrofulous young girls. If drops be present, it is the more indicated. It is sometimes useful in disturbances of the menses, especially when insomnia is the chief and most distressing symptom. In these cases it brings on the periods and, at the same time, sleep.

*Lachesis*²¹⁰ in *Typhlitis*.

Dr. J. Fitz-Matthew² reports: Delicate school-boy, aged ten years, had been drinking bad water, eating green tops of some plant, and violently exercising at play. Symptoms: Frequent vomiting, yellowish, greenish, preceding; patient on his back, characteristic posture; right leg drawn up; erection of penis; hard swelling in right or ilco-ingui-nal region, intensely painful to touch or movement; temperature, 103; pulse, 130 to 140; tongue pointed, bright scarlet; always worse after sleep; would wake up, and then scream with pain. R *Lachesis* 2c (Dunham); second dose in half an hour; then every hour till improvement was evident; *Sac-lac*, to follow. Four doses were given. I found patient in the morning wonderfully better and out of danger. Later an enema of warm water removed a mass of very fetid fecal matter. Patient was now convalescent.

Colium temulentum---A New Drug.

Dr. Mossa²²⁰⁹ reports from Italy this case with comments: A carpenter, aged twenty-nine years, had been suffering ever since his eighteenth year of trembling in both hands, especially in the morning; of late also his legs began to tremble. It is remarkable that both his father and his brother were subject to the same ailment, while no definite cause could be indicated. He was first given *mercurius vivus*, then *agaricus*, which brought a partial but only transitory improvement. Finally I prescribed *Colium t m.*, which in a short time effected a cure.

(The pathogenetic effects of this remedy which has not yet been proved at all are only known to some degree from its effects when it has been mixed with grain and baked into bread. It has caused chest troubles, vertigo (thence the name *darnel-grass*, in German *Tammelolch*), trembling, paralysis with an-

guish and distress, vomiting, fading of the memory, blindness, headache, epileptic attacks, deep sleep and insanity. The good success obtained by the use in the case given above shows what curative effects may be expected from it in severe affections of the brain or spinal marrow. An Italian physician, Fantoni, has tried it in cephalalgia, meningitis rheumatica and in ischias.)

Gelsemium in Headache.

Dr. Berlin²³ cured this case on characteristic indications: Miss von P., about thirty-six years old, has been suffering ever since spring from a chronic headache, which last week came every day. It begins in the morning as a pressure in the occiput and neck, then gradually draws up over the head until it reaches the forehead and remains fixed over the eyes. Here the patient feels the pain pressing like a hundredweight. At the same time her head has a benumbed feeling and she is often incapacitated from thinking. The head is hot, the face red, and this the more according to the violence of the pain. The appetite is changeable; the patient also suffers from venous congestions of the abdomen and from hemorrhoids, which, however, cause her no trouble. During the headache there are frequent visual disturbances, everything before her eyes becoming black, and for a time she sees nothing at all. Toward evening the pains gradually cease. Since last September she has suffered much from cold feet. In the course of the summer she had repeatedly taken allopathic medicines, including quinine, phenacetin and migrenin. These remedies had occasionally brought some slight temporary relief but the next day the pain returned all the same. The general health had always been disturbed for some days by these remedies; there appeared great weariness, buzzing of the ears, lack of appetite, nausea, etc., so that not much good resulted from the use of these remedies, and the patient finally altogether dispensed with the taking of allopathic medicines. She had before this learned to know the efficacy of homeopathic remedies, and accordingly she then came to me for help. On the 4th of September, 1897, in accordance with her symptoms, I gave the patient *Gelsemium* d. 3, giving daily four doses of five drops each. To remove at the same time the coldness of the feet, I ordered her to take warm foot-baths, and foot steam baths of fifteen to twenty minutes' duration, and cold foot-baths for one to

two minutes. When her feet were cold, a hot application, when they were hot, a cold foot-bath, once a day.

On the 11th of November the lady consulted me again on account of some other ailment, stating that as soon as she had taken the gelsemium her headache was ameliorated and on the third day had entirely disappeared and had not since returned.

Bellis perennis Indications.

Dr. Goullon²⁹ calls attention to this indication for *bellis*, the common daisy, given by Dr. Burnett in his work, "Tumors of the Breast." On page 101 he remarks: "I would here give an important clinic hint with respect to *bellis*. It is of frequent use when the symptom is: Wakes early in the morning and cannot get off again." This phenomenon is frequently found, and strange to say it is usually connected with abdominal troubles. So also in the above-mentioned case we read: "The chest is sound; the abdominal tumor still is very large and the patient has altogether the appearance of a woman with child." After taking *bellis* 1 she sleeps well and feels easier in the abdomen. Dr. Burnett continues: "In cases of pregnancy and of tumors of the uterus (also in enlargement of the heart) *bellis* gives great relief, i. e., it removes the effects of mechanical pressure." I can only confirm that also I have observed that when *bellis* was given owing to such an indication, the tumor existing in the chest considerably decreased.

Amygdalus persica, or Peach Leaves.

I wish to acquaint the medical fraternity with the use of the above remedy in an irritable condition of the stomach, whether reflex or otherwise.

Some eighteen years ago I had a case—a female with erysipelas of the face. After the disease had run six or seven days, her stomach became so irritable that nothing would lie on it. I used all my best known remedies, but could not stop the vomiting. She was in the seventh month of gestation, and fearing it would lead to an abortion, I was at my wits end, when a kindly lady said to me, "Did you ever use peach leaves in a tea to stop vomiting?" I said, "No, I never heard of it;" but I soon had a tea of it made from the bark, as it was in the winter, and the second dose calmed that troubled stomach (I then said God bless the women, we can't do without them.)

My second case was in counsel with my wife (Julia Clayson Eberle). The patient was

in her third month of pregnancy, and had reached the point where she could not retain food but a short time. She had had "regular" treatment before she came to us. We put her under the treatment of *amygdalus persica*, and in a few days she was well, having no more emesis during her term.

The third case was in her fourth month. She was in a pitiable condition; had been taking *ercosote* in the "regular" way until anasarca had set in when she came under our care, when *amygdalus* was used, and in four days her stomach was so that she could retain food without the least nausea or discomfort.

I have used it in tincture diluted with water, also 2x, and 3x with children. Put three leaves in a cup and pour hot water over it, will do for a child—that is if you are caught in the country.—J. K. Eberle, M.D.³⁷

Asafetida in Lacteal Derangement.

Dr. Belle Gurney³⁷ treated a mother who had had chorea in youth, and during pregnancy. She had had three children, and had lost two of them. Her milk disappeared after four, three, and two months respectively, and the babies never throve on prepared food. At full term another healthy (?) babe came to cheer the heart of the distracted mother. In one month the milk in the right breast was gone and so small in amount and poor in quality in left that it did not satisfy the infant at all and they had to resort almost entirely to prepared food. When five months old "bowel trouble," so called by the mother, set in and I was called; being a true homeopath I at once began looking for the cause in order to cure the effects, eliciting the foregoing facts. (Cham. 2c cured the baby.)

You will notice each time the milk disappeared a month earlier.

To sum up the symptoms—The nervous trouble, lacteal derangement, deep-seated bone pain, especially left side, with minor symptoms found under this remedy led me to give her *asafetida* 30, five powders, one every two hours.

Patient was exceedingly nervous for two days when a decided improvement was noticed in general health and an improvement in quality of milk ere the end of a week. Also a slight tingling in right breast. Three weeks later seemed to be a slight decrease in milk. A dose of *asaf.* 2c was given. Some milk returned in right breast but she was afraid to give it to the baby. One week later the

from two new disorders, and the babe has continued regular from ever since, and it is now a year old. She says if they are ever troubled with another baby she will have some such a remedy in medicine right away so as to prevent a repetition of the old trouble. An obstinate constipation disappeared, with marked improvement in general health, under the action of this remedy.

Lachesis Pains.

April 10, 1894. Woman, age thirty-two, married, housewife. Has sticking and drawing pains all over body. These come fast for a time and then are better for a short period. They are worse at night. Gets considerably, which amel. the pains, but warmer wraps also amel. the pains. They wake her from sleep. All the body is very sore to touch, even pressure of bed clothes hurts her. Cannot get into bed nor on her feet. Always very thirsty. Tongue brown and thickly coated. Menstr. irregular and scanty. Profuse cold sweat all over body at night. *Lachesis*, one dose.

May 8, 1894, pains all gone. Soreness, sweat and thirst also gone. Tongue clean. No other medicines or adjunct treatment. No return of symptoms.—Wm. C. Young, M.D.²⁰

Cocculus in Vertigo.

Halbert, of Chicago, in the course of a medical lecture, refers to the fact that vertigo may be either objective or subjective. There is from some cause, a disturbance in the visual apprehension of external objects or a mental failure of comprehension of what the eye sees. In such instances we may really term it objective perversion, because the particular object is not comprehended by a proper focus or else it is not understood in its natural condition. In other words, all comprehension is apparently normal except with reference to that particular object or that particular relation or distance.

There is, however, another form of vertigo in which the fault is due to systemic disturbance of the patient. For some reason there is a vertigo under all conditions and relative to all objects. In other words, the fault is with the patient entirely, who feels himself or herself falling or swimming, as it may be. This is purely subjective, and generally it is associated with nausea or disturbances of the stomach together with sick-headache. It is this class of cases which should call our

attention to *Cocculus*. We find its principal action is upon the solar plexus, hence the symptoms characterized by the loss of appetite, aversion to food, nausea in the morning, nausea with salivation, sick-headache and all the peculiar gastric disturbances, with the sensation of something abnormal in the stomach.

A case is reported which affords evidence of the value of *Cocculus* in subjective vertigo when the irritation begins in the region of the solar plexus and gradually develops into the neurasthenic type with the occipital headache and lumbosacral irritation.

Trillium After Labor.

Woman, aged thirty. On first getting up after a normal labor had considerable bright red, bloody, uterine flow, with intense sacral lumbache as if whole pelvis would separate into two halves, which was agg. by a tight bandage about hips. Also a sensation as if the pelvic contents would drop out through the vulva; amel. on standing, less when walking, and none when sitting, this is agg. by wearing a tight perineal support. *Trillium*¹⁵, three doses, then S. L. About twelve hours after taking the remedy had severe numbness in entire arms and both legs and feet, half way to knee. Passed off gradually in course of next twenty-four hours, and within thirty-six hours all above-given symptoms also.—Wm. D. Young, M.D.²⁰

Veratrum alb. in Neuralgia Facialis.

A man of thirty years, lean, of large stature, had suffered from violent tearing pains in his whole head, concentrating themselves in the left side of the head. During the past six nights they had been so violent that he had been unable to sleep. He appeared to suffer much, with no signs pointing toward either the eye or ear. It was disagreeable to open the eyelids in the dark; the pains so violently tearing that nothing can be obtained as to their nature. As soon as he goes to bed he breaks out into a profuse sweat over his whole body. *Veratrum alb.*, 3x, fifteen drops in a wineglassful of water every hour and a half teaspoonful, and later every hour, was given. After having taken a few doses he felt easier. That night he went to bed fearing the fearful sweat, but it did not reappear, and he slept excellently the whole night, and woke the next day with a dull pain in the eye-region, which, with continued use of the remedy, gradually left him. A weakness of the eye remained for some time.

Borax and the Cobweb Symptom.

Dr. Belle Gurney¹⁷ reports the following:

Mrs. D., age forty, mental vital temperament. Light complexion, but some brown spots on face. Very nervous, always doing for others, never idle. Very dainty in tastes and habits. Can hardly sleep at night without having taken a bath before retiring.

One year ago I visited two weeks in her home, during that time I noticed she had a good deal of difficulty in eating on account of her mouth and tongue being so sore. She said it had been that way nearly all the time for two years.

Small ulcers in buccal cavity, especially on gums. Tongue sore, hard, sensitive. For a long time she complained of a sensation of cobwebs on the face; I frequently saw her brush her hands across her face to brush the webs away.

I was anxious to prescribe for her, but as her husband was a fine allopathic physician I felt reluctant to offer her some little pills. Finally I asked her if she would try some of my sugar pills and as she was sure they would do no hurt, she said she had no objections to trying it.

I yst rim and such things only gave a temporary relief.

The day before I left I gave her three powders of borax 30, one every two hours.

Next morning the mouth felt better. A week later the tongue, as well as the rest of the mouth, was entirely well. The sensation of cobwebs disappeared. Two weeks ago she told me she had no return of either trouble.

Arnica montana in Acute Tonsillitis—Quinsy.

Dr. M. A. Wesner³² claims that arnica will abort cases of quinsy when indicated by the following symptoms: Severe pain when swallowing which extends to one or both ears; unable to swallow solid food; swallow large quantities of liquid with more ease than a small quantity but either is extremely painful. Mouth opens with difficulty; swelling and tenderness at outside of neck; one or both tonsils largely swollen and of a light red color; swelling has a puffy appearance and extends upward and forward involving the soft palate and the uvula which are also light red. In addition the patient is chilly; has fever; thirst; his voice is husky and indistinct; is unable to lie down in most instances; has soreness of muscles and a feeling of general malaise. Pay particular attention to the character of the swelling—its

light red color, its puffiness and its general direction.

Here is one of Dr. Wesner's cases, corroborating his claim:

I was called to see Mr. H., Feb. 8, 1898, aged thirty-five years. His temperature was 102°; he was chilly; thirsty; unable to lie down or sleep; had swelling and tenderness at right side of neck. His right tonsil was light red and so enormously swollen that it reached across to its fellow on the opposite side. Soft palate and uvula were also swollen and of same color. Uvula was about as thick as an ordinary man's thumb. All had a puffy appearance. He was unable to swallow solid food or a small quantity of liquid, but with great effort he occasionally succeeded in getting down large quantities of liquid. I gave him arnica 6x., in water every hour. Upon my arrival next day my patient's temperature was normal, and he had been able to lie down and sleep part of the night. His right tonsil was about one-half reduced and swelling of uvula and soft palate had all disappeared. All symptoms of quinsy left in two days without suppuration.

Ars. jod. in Meningitis—Tubercular (?)

Dr. J. Martin Clark³ says: A regular physician called me in consultation over the case of a male child two years of age. The doctor related how the prodroma appeared as gastric fever, but were quickly followed by what seemed to be typho-pneumonia. After two weeks this abated and cerebral symptoms developed to such an extent as to warrant the diagnosis of tuberculous meningitis, with an unfavorable prognosis.

The baby was the youngest of a large family of children, living in a dark, cramped flat on the third floor. The patient lay unconscious with the eyes partly closed, the globes rolled upward, and, if I remember correctly, lacking the corneal reflex. I do not now recall all the particulars of the case, but the conditions were grave enough to justify the attending physician's diagnosis. The one persistent and alarming symptom was what appeared to be cerebral vomiting. Suddenly, during the night, the little patient would arouse from stupor with an explosive emesis that was so severe as to alarm the friends, imminent collapse seeming near. It was owing to the frequency of these attacks that the doctor had despaired of remedial measures, as no medicine could be retained. This was also the reason why I was called upon to prescribe a homeopathic

remedy. *Arsenicum iodatus* 3 was given every half hour. To my mind a striking feature in the former treatment was the protracted nursing. The mother had been permitted to do so owing to the fact the child had not been weaned prior to its illness. I advised the immediate suspension of such feeding. The patient retained every dose of the medicine administered, and to the surprise of all, quit vomiting. Later, artificial feeding was instituted; convalescence was established, and recovery at last reached. I do not vouch for the accuracy of the diagnosis, but there is no doubt the remedy and the change of diet saved the child's life.

Eczematous Eruption produced by Atropine.

On August 9th, H. H., aged fifty-five, consulted me regarding defective vision in his left eye. On ophthalmoscopic examination a satisfactory view of the fundus oculi could not be obtained, so I instilled two or three drops of liq. atropine sulph. (B. P. 1885) and asked him to return the following evening for further examination. On his return he presented a curious condition. The left side of the nose, the left cheek, and the left half of the upper lip exhibited an acute eczematous condition. After the atropine had been instilled the tears had trickled down that side of the face, no doubt carrying some of the atropine with them, and within a few hours he complained to his wife of feeling a burning sensation all over the area subsequently affected. The treatment consisted in covering up the affected area with starch paste, to which a few grains of boric acid powder had been added, and in four or five days the condition had disappeared. Throughout the pulse and temperature remained normal, and the local condition was the only cause of complaint.

On further inquiry I find that he is very susceptible to the action of belladonna. Four months ago he sprained his right wrist, which was treated with a liniment containing belladonna, and this gave rise to a similar eruption all over the part. He is also subject to lumbago, which can be relieved by the application of a belladonna plaster, but the eruption caused by this is so bad that he declares the cure is worse than the disease.

During the last nine years I have used atropine almost daily, but never before have I met with a similar experience.—William Bryce, M.D.*

Guarana as Used in Brazil.

Dr. Staeger^{9 28} has culled old observations of the native Brazil remedies, from which we note the following regarding guarana, the Brazilian cocoa:

Guarana (produced from *paullinia sorbibilis*, one of the *sopindacæ*) contains, as is well known, some caffeine, together with other constituents, and is much used as a beverage in South America, like as the Paraguay tea and the Mate tea.

Guarana affects especially the nerves of the abdomen and acts very efficiently as a depressing remedy in diarrheas and dysenteries originating from colds or from mental emotions, or, in general, from states in which a morbidly augmented sensitiveness of the plexus coeliacus is present. It is not, however, indicated in congestions or saburra. In larger quantities it excites the whole nervous system, causes diplopia, sparks before the eyes, insomnia, an unusual excitation and other similar states. In metorrhagias and other passive hemorrhages it has been of excellent service. Somewhat peculiar is the notion spread through all Brazil that it acts, indeed, as an aphrodisiac, but takes away the "*vis fecundaus semines virilis*." This double action need not surprise us in a remedy used as a beverage. A homeopath will at once understand such a diverging action of a remedial agent.

Globules.

The great Broadway fire "contagious," as old Dr. Lilienthal used to say, to our printers' establishment caused delay in this issue of the journal.

FIRE and a bargain! Some very slightly shelf-worn and smoke-touched sets of Gentry's Repertory in different bindings, some leather some half morocco, for all practical purposes just as good as new, at \$10. the set long as they last. Address the publisher.

No, "X. Y. Z.," we are not fighting any one college when we speak so "drastically" of poor teaching of homeopathy. Indeed, the very college you mention contains two of our students. As with the One-Woman figure, so with the college editorials. They are aimed at the system of unhomeopathic teaching

which has flooded our modern system, and which is unquestionably at the bottom of so much homeopathic infidelity—and not any one's college.



We have some very interesting and instructive materia medica matter in our copy box from the pen of the gifted Dr. Edward Fornias of Philadelphia. This will be published during the ensuing year and will be appreciated by all lovers of the homeopathic materia medica.



The different "literary" journals for the holiday number are out in beautifully designed covers. Scribner's has done this, however, for several issues. Harper's keeps up its general design, but varies the figures and details and puts them in colors. St. Nicholas and Century need to be seen to be really appreciated. They are very pretty.



Have you seen the Antikamnia Calendar for 1899? It's a beauty, same as last year and the year before that. This year Crusius leaves the medical side alone and puts his skulls on different kinds of people. It is an attractive calendar and Crusius' manipulation of a bare skull so that it depicts the nationality or personal traits of the character represented is truly a work of genius.



The Palmar Arch, a non-sectarian medical fraternity of Cleveland, which twisted a Century anonym so much, is showing its purpose plainly. It has entered the medical field determined to cleanse its Augean stables of improper students, and to throw such safeguards about the profession generally as shall eventually purify and ennoble it. The P. A. is out in a little circular signed by the committee, Dr. H. F. Biggar, chairman, soliciting expressions of opinion on a series of questions propounded. This society is certainly NOT altogether engaged in the mutual admiration business, nor in presenting learned professional papers and soup plates full of ovaries for personal advertisement and inspection.



The list of unreviewed books published in this issue will show that they have been duly received and properly appreciated, but not yet reviewed. Book people, publishers and authors, have learned before now that we try to speak truly about books sent us for review.

We are not given to noticing the color of the paper, the size of the volume and the typology and with a little harmless puff dismiss the matter. We would rather say nothing at all than be hypocritical. We have always believed that the profession depends for its success on its literature—even the professors—and that if a poor or unworthy pastepot kodak-made book is foisted on the profession the harm may be incalculable. And per contrary, a good book ought to be properly set out to the reader in order that it may accomplish the end and aim of the honest author. Our Book Reviews are made in all seriousness and mean what they say. They are not influenced either by the promise of other books from the same firm, or the promise of personal favors from the author.



The Chironian gave us a bad quarter of an hour when we opened its current issue and found several pictures, accompanied by biographies! At first blush it looked as if these several doctors were dead. And Death has been very busy this past few months with our profession! The Chironian gave the pictures and biographies of Allen, Houghton, Talcott, and Dillow—all good men and true, and all of them teachers and brethren whom we cannot spare for a good many years yet to come.



Which reminds us to say that the Memorial Service of the American Institute of Homeopathy is being anticipated by an innovation on the part of the retiring president. This consists in the appointment of a large committee immediately upon the death of a member; this committee thereupon brings in its report, which is published in the local newspapers along with the other mortuary tributes. So when the end of the Institute year comes along, and the Memorial Service is in order, the work has all been done by these committees appointed out of meeting, annual or special, and the routine obituary work is soon disposed of. This was done in the case of Dr. J. S. Mitchell, who died at Chicago recently. We are waiting now for the committee appointed in the case of that other good and great Homeopath, of Boston, and life-long member of the Institute, Dr. J. Heber Smith, who departed this life a few weeks before Dr. Mitchell. And as well also in the case of the poet, Dr. N. W. Rand. This looks as if it might be a solution of the vexed Memorial

